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ABSTRACT

The exploration of innovative programs in counseling is the focus of this journal. Articles include: "Social Images and Interpersonal Interaction: Implications for Counseling Chinese and U.S. College Students" (Russell L. Young, MyLuong T. Tran, and Joseph D. DiLella); "Persistence Rate of College Freshmen with Declared Majors" (Sandra K. Brodwin and Martin G. Brodwin); "Job Satisfaction Among Full-Time Counselors in California Community Colleges" (David L. Baird and David L. Inglis); "Organization Commitment Among California's Public Rehabilitation Counselors" (Jamie Satcher and Marcheta McGhee); "Accountability in a University Counseling Center Through Total Quality Management and Qualitative Research" (Phillip A. Whitner and Daniel J. Abrahamowicz); "The High School Counselor: Restructuring for Survival" (Joe V. Diaz); "Using Information in Counseling Children: A Child-Centered Perspective" (Angelo V. Boy); "As Long as There Are Katrinas, It's Still Not Enough" (Trish Hatch); and "Mi Sueno" (Teresa Mercado-Cota). Contains CACD journal guidelines for authors and a CACD leadership team directory. (RJM)

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Volume 16

1995-96

CACD JOURNAL

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THE EDITOR'S MESSAGE

Pat Nellor Wickwire



This issue of the *CACD Journal* includes clear evidence of the art and the science within the counseling and human development profession. The counseling heart, mind, and spirit combine to seek, create, and practice understanding, knowledge, and skills to support the excellence of the profession. The articles amply and aptly reinforce the 1995-96 CACD theme, "Innovations in Counseling—What's New—What Works."

Russell L. Young, MyLuong T. Tran, and Joseph D. DiLella present the findings of a study of Chinese and American college student perceptions of traits, behaviors, and social interaction.

Sandra K. Brodwin and Martin G. Brodwin report an investigation of the effects of rational and arbitrary decision-making processes on the persistence of freshman college students.

David L. Baird and David L. Inglis outline results of research with community college counselors regarding job satisfaction, satisfiers and dissatisfiers, and selected issues. Jamie Satcher and Marcheta McGhee report the findings of a survey of rehabilitation counselors about affective, normative, and continuance organizational commitment.

Philip A. Whitner and Daniel J. Abrahamowicz inform of qualitative research and Total Quality Management philosophy and concepts, and give examples of applications.

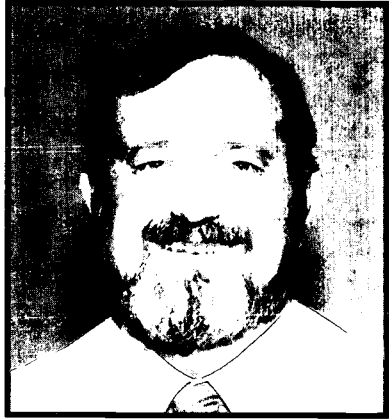
In the continuing feature, "Professional Practices in Counseling," Joe V. Diaz supports the active involvement of high school counselors in educational reform. Angelo V. Boy proposes guidelines for emphasizing affective needs and using information in child-centered counseling.

In the continuing feature, "Professional Side of Counseling," Trish Hatch describes the vital role of an elementary school counselor in assisting a chronically ill student. Through poetry, Teresa Mercado-Cota expresses a vision of self-actualization.

The *CACD Journal* is part of the active offerings of the California Association for Counseling and Development. Readers are cordially encouraged to take pride in the professional advances recorded in this issue—and cordially invited to forward manuscripts for future issues.

THE CACD PRESIDENT'S MESSAGE

Wade Hawley



The California Association for Counseling and Development is delighted to provide you with the 1995-96 *CACD Journal*. Throughout the year, several diversified professional and personal growth opportunities are offered. This publication is only one of the many services provided to members.

The *CACD Journal* provides members a well-rounded collection of articles of value to all counselors. The *Journal* allows counseling professionals to share their ideas, experiences, observations, theories, and practices with other members. It is through such meaningful publications as the *Journal* that the future direction of our profession is explored.

The *Journal* is a collaborative effort of the Editorial Board under the able leadership of Editor Pat Nellor Wickwire. We owe Pat our gratitude for a job well done. Enjoy!

Social Images and Interpersonal Interaction: Implications for Counseling Chinese and U.S. College Students

Russell L. Young, MyLuong T. Tran,
and Joseph D. Di Lella

Thirty-seven Chinese and 26 American students were surveyed on the social images they held for each national group and on interaction patterns with fellow students. Chinese students reportedly felt more comfortable with the national group that was more similar to their self-image, while Americans felt more comfortable and associated with those that were more similar to themselves.

The numbers of Chinese students from Hong Kong, Taiwan, and China have dramatically increased in the international university community and in colleges throughout the United States. Approximately 97,000 students from these three countries arrived in the U.S. to study in the 1992-93 academic year alone (Institute of International Education, 1993). Yet, counselors still struggle to assist Chinese students to adjust and adapt to their U.S. college counterparts. In general, university counselors need to discover how ethnic groups integrate into the college social scene through informal relationships. One manner of doing this is understanding how groups form stereotypical attitudes about their ethnically diverse peers. Sensitivity to ethnically diverse college students may lead counselors to better understanding of the isolation, loneliness, and depression felt during a Chinese student's stay on a U.S. university campus.

A Chinese student's social life is of primary interest to college counselors because of its impact on personal and academic adjustment. Yet, Asian American students (Chinese, Japanese, and Korean), in general, tend to shy away from counseling services because of the stigma attached to seeking professional assistance during emotional states (Mau & Jepson, 1990). Instead, Chinese students tend to seek out friends when confronted with social, personal, courtship, sex, marriage, family, or vocational problems (Mau & Jepson, 1990).

Acculturation of Chinese college students depends on this group's ability to recognize the need to seek counseling and openly discuss problems with college counselors. Atkinson and Gim (1989) found that Chinese students' attitudes toward seeking professional counseling directly related to their level of acculturation. Newly arrived Chinese students tend to stigmatize the college counseling profession. This is just one example of how different ethnic groups place values and stereotypes on the professional staffs of a university campus.

Ethnically diverse groups—whether in the neighborhood community or professional arena—form close friendships with others when they perceive a shared culture

Russell L. Young is Associate Professor, Department of Policy Studies in Language and Cross Cultural Education, San Diego State University, San Diego, California.

MyLuong T. Tran is Associate Professor, School of Teacher Education, San Diego State University, San Diego, California.

Joseph D. Di Lella is Lecturer, Stanford University, Palo Alto, California.

(e.g., customs, shared social rule system). The attraction Chinese have to co-nationals may be explained by the similarity-attraction theory. By definition, ethnic group members tend to be attracted to people who are similar to them (Palmer & Kalin, 1985). Similarity indicates compatibility to other ethnic groups, and this is a sign that future interactions will be rewarding and free of conflict. Ethnic groups of perceived similar character traits (e.g., cultural preferences, behavior)—whether at home or in a foreign land—tend to be viewed more favorably at the initial stage of personal interaction (Gonzales, Davis, Loney, Lukens, & Junghans, 1983).

Chinese interaction with Euro-Americans tends to stay at the superficial level. Hull (1978) and Miller et al. (1971) speculated that one source of incompatibility is the difference in the meaning of friendship between Americans and Chinese. Many Chinese see friendship as a long, intimate, and self-revealing relationship, and are ill-prepared for the casual, superficial, and extroverted friendships found among Americans (Klein et al., 1971). The problem of a short-term friendship exists in the college environment where casual relationships may last only as long as a semester or academic year. Such instability may lead many Chinese students to view friendship as an emotionally painful experience.

Many Chinese students place their professional and academic goals higher than social concerns and the formation of close, meaningful friendships. Significant differences in values (Kuo & Spees, 1983; Yao, 1983) also play a major role in forming cross-national friendships. Therefore, Chinese may not place a priority on finding non-Chinese friends, so may not actively search for emotionally stable friendships among U.S. students (Chu, Yeh, Klein, Alexander, & Miller, 1971).

Although Chinese tend to stay within their own ethnic group, some do actively seek and desire friendship with Euro-Americans. When Chinese students travel to the U.S., those who are comfortable with their experience report more frequent contact with Americans. These students are also likely to indicate more general satisfaction with their overseas experience academically and non-academically (Hull, 1978). Additionally, Chang (1972) found that positive Chinese attitudes were related to the extent of association with Americans. On the other hand, Klein et al. (1971) found that the more isolated Chinese college students saw Americans as unfriendly, insincere, superficial, and incapable of being close friends. A correlation appears to exist between positive academic experiences and perceived strong friendships between Chinese and U.S. college students.

Chinese and U.S. collegiate relationships were explored in this study. First, which character traits and behaviors are attributed to Chinese and U.S. college students? Second, does perceived similarity of traits and behaviors affect the degree of comfort in interaction with someone from a different national group? Third, what can college counselors do to offset this stereotyping behavior among university students?

Method

Subjects

Thirty-seven Chinese students (20 female, 17 male) and 26 American students (12 female, 14 male) at the Chinese University of Hong Kong were surveyed. The average age of the group ($N=63$) was 20.89 years old. The American sample tended to be older because of the higher number of upperclass and graduate students.

Instrument

The survey included five sections. The first section required subjects to match 19 behaviors with 12 character traits. Each behavior and trait could be matched with more than one trait or behavior. In section 2, subjects were asked to check behaviors and traits that were associated with people they felt most comfortable with in the college environment. In section 3, the same 19 behaviors and 12 traits were to be checked if they were more characteristic of the subject. Subjects were asked in section 4 to indicate which of the behaviors and traits were more characteristic of Chinese or Americans.

Section 5 consisted of two Likert-scale questions. The first question used a 5-point scale to rate the degree of comfort felt when associating with Chinese or American students. The scale ranged from feeling "highly comfortable" with Chinese rather than American students to feeling "highly comfortable" with American rather than Chinese students. The second question used a 5-point scale to ascertain the proportion of time spent with Americans and Chinese outside of class.

Procedure

Surveys for the Hong Kong Chinese students were administered and collected from undergraduate psychology classes. Because the Americans were spread out throughout the campus the surveys were given individually and returned to the foreign student office. Anonymity and confidentiality of results were assured to participants.

Results

Table 1 and Table 2 include a list of traits and behaviors subjects perceived as being more characteristic of Chinese or Americans. According to chi-square results, Americans reported that, as a group, they were more able to influence others, more able to express emotions, apt to dominate conversations, verbally offensive at times, easily upset, argumentative, cheerful, irritable, spontaneous, bold, frank, and aggressive. Statistical significance was set at the $p < .05$ level (although many of the chi-square results were significant at even the .01 level). The U.S. students were similar to Hong Kong Chinese in how they characterized Americans. However, Chinese students did not agree that U.S. students made verbally offensive remarks or became irritable on occasions.

Americans noted that Chinese "did not talk as much in groups," "listened more to what others had to say," "seemed more unsure of themselves," "thought carefully before speaking," "had more difficulty in relations with the opposite sex," and "were more reserved, serious, obedient, considerate, and calm" than Americans. The Chinese students agreed with the Americans on these self-described characteristics. Chinese students felt that their ethnic group was "more sensitive to others' feelings," "more respected by others," and "more stable" than Americans.

Both U.S. and Chinese students were in agreement in their judgments of ethnic-attributed behaviors. Nine of the 19 core behaviors (by both U.S. and Chinese students) were seen as either "more Chinese" or "more American."

Core behaviors were rank ordered in frequency for each comparable trait. Spearman rho correlations were then calculated, measuring the relationship between American and Chinese rank orders. The correlations were significantly high at the .01 level for all 12 traits. This finding indicated that Chinese and American students conceptualized traits according to similar behavioral structures. In other words, Chinese and American students tended to label behaviors with traits in the same

Table 1***Chinese and American Images of Behaviors as
"More American" or "More Chinese"***

Behaviors	Chinese students			American students		
	More Chinese	More American	χ^2	More Chinese	More American	χ^2
	<i>n</i>	<i>n</i>		<i>n</i>	<i>n</i>	
Is able to influence	5	23	11.57**	3	17	9.80**
Helps others	12	19	1.58	11	6	1.47
Wants to be around others	13	21	1.88	13	8	1.19
Is able to express feelings	4	23	13.37**	1	20	17.19**
Gets along with others	13	18	.38	10	4	2.57
Dominates the conversation	7	21	7.00**	1	18	15.21**
Does not talk much in groups	31	1	28.12**	17	0	17.00**
Gives compliments to others	15	14	.03	10	5	1.66
Listens to what others say	28	5	16.03**	22	3	14.44**
Says offensive things at times	11	16	.93	1	21	18.18**
Seems unsure of self	24	2	18.61**	14	4	5.55*
Thinks carefully before speaking	29	2	23.52**	14	4	5.55*
Gets upset easily	14	13	.04	2	16	10.88**
Usually achieves goals	13	12	.04	5	7	.33
Hard relating with opposite sex	27	3	19.20**	17	1	14.22**
Sensitive to other's feelings	25	6	11.65**	11	4	3.26
Tends to get into arguments	3	23	15.38**	1	17	14.22**
Is respected by others	18	4	8.91**	4	4	0.00
Make those around at ease	9	15	1.50	4	11	3.26

p* < .05. *p* < .01.**Table 2*****Chinese and American Images of Traits as
"More American" or "More Chinese"***

Traits	Chinese students			American students		
	More Chinese	More American	χ^2	More Chinese	More American	χ^2
	<i>n</i>	<i>n</i>		<i>n</i>	<i>n</i>	
Reserved	30	1	27.13**	23	1	20.16**
Cheerful	2	29	23.52**	4	13	4.76*
Stable	28	0	28.00**	13	5	3.55
Irritable	8	14	1.64	1	17	14.22**
Spontaneous	4	23	13.37**	0	22	22.00**
Bold	6	21	8.33**	0	21	21.00**
Serious	30	2	24.50**	19	2	13.76**
Obedient	28	1	25.14**	19	1	16.20**
Frank	5	25	20.00**	3	20	12.56**
Considerate	30	1	27.13**	12	4	4.00*
Calm	26	2	20.57**	16	3	8.89**
Aggressive	3	24	16.33**	2	21	15.69**

p* < .05. *p* < .01.

manner. Spearman rho correlations between Americans and Chinese ranged from .595 to .913, with all significant at the .01 level.

Self-ratings of traits and behaviors were then compared with comfortability ratings. The probability matchings for traits and behaviors were calculated using chi-square analysis. Twenty-two of 25 Americans (88%) saw both admired traits and behaviors for people they felt comfortable interacting with (match on the .05 probability level or better). For Chinese students, 29 out of 36 (81%) viewed others as they saw themselves; thus, they felt comfortable on the casual and interpersonal level (at the .05 level).

Thus, the data tend to support the hypothesis that students tend to feel more comfortable with an ethnic group that is more similar to self—confirming the similarity-attraction hypothesis. This conclusion was made through a similarity score which matched self-perceived traits and behaviors with perceived traits and behaviors of other ethnic groups. The similarity score was then correlated with the comfort scale. It was found that Chinese students – as well as American students – tended to feel comfortable with members of an ethnic group that was similar to self ($r = .370, n = 35, p = .0285$; $r = .554, n = 23, p = .0061$, respectively).

Using the same process, feelings of similarity to ethnic groups were correlated with degrees of association with ethnic groups. American students were found to associate more with the national group that was seen as similar to self ($r = .450, n = 23, p = .0310$). However, Chinese students were not found to associate more with the national group that was seen as similar to self ($r = .092, n = 36, p = .5904$). This seems to imply that Chinese may seek more frequent interaction among different ethnic groups than American students.

Discussion

Three major findings of this study may aid college counselors when interacting with Chinese students. First, there were differences in perceived traits and behaviors attributed to Chinese and Americans. Second, American and Chinese students used similar behaviors to exemplify certain traits. Third, perceived similarity to a national group was related to one's degree of comfort with that national group.

Both Chinese and American students had distinctive images of the traits and behaviors associated with their respective national groups. It was easier for both Chinese and American students to associate traits rather than behaviors with national groups (Mischel, 1979).

Traits and behaviors associated with each national group were consistent with findings of previous studies on ethnic cultural characteristics. Four decades ago, Francis Hsu (1955) noted two major differences between Chinese and American cultures: Americans tended to be much more open and expressive with their emotions while Chinese seemed more private and controlled. The second major distinction Hsu saw was that Americans were much more "me" oriented, while behavior among Chinese was more "group" oriented. Others have noted similar distinctions since Hsu (e.g., Yue, 1992). In this study, Americans were thought to be more expressive in their feelings, spontaneous, irritable, and aggressive. Chinese, on the other hand, were identified to be more reserved, serious, thoughtful, and calm.

In terms of assisting the Chinese college student, a U.S. counselor can better understand social interaction problems by understanding the process of stereotypical ideas of traits and behaviors. For example, if Chinese college students believe Amer-

icans are more expressive than themselves, they may feel inadequate emotionally or linguistically. A counselor may need to expose this potential fear to clients for reconciliation.

Second, results of this study indicated that American and Chinese students use similar words and phrases to identify behaviors attributed to traits. This finding was especially important because English is a foreign language for Chinese. A U.S. counselor needs to know whether certain first and second language words (associated with traits and behaviors) connote similar lexical meanings. In this study, trait definitions were inferred from behavioral definitions. Since Chinese and American students use similar behaviors to describe traits, one can be more confident that subjects will use similar lexical meanings when answering a survey.

Counselors may also need to be sensitive to lexical and cultural meanings when interpreting social misunderstandings. For example, a college counselor may misinterpret the cause of incompatibility between a Chinese student and an overly extroverted American roommate. Counseling by reconciling "value conflict" may rectify a delicate situation.

Since this study extended the similarity hypothesis to cross-cultural interaction, the results suggests that perception of similarity may influence the degree of comfort in interactions with people of a different national group. At the Chinese University of Hong Kong, Chinese students had little opportunity to interact with the few Americans enrolled on campus. All American students, on the other hand, had Chinese roommates and many opportunities to interact with Chinese. Results showed that Americans chose to associate themselves with only Chinese who exhibited admired and similar behaviors and traits.

Counselors may first need to develop coping strategies for Chinese college students who feel dissimilarity among U.S. students, whether they be African American, Latino, or Euro-American. First-generation Chinese Americans have exhibited alienation, low esteem, and prejudice on the college campus in the U.S. (Asamen & Berry, 1987). Exchange students may be obvious candidates for preorientation sessions in acculturation on U.S. campuses.

Campus psychological services may also want to consider hiring an ethnically diverse staff because race plays an effective role in counseling Chinese students (Atkinson, Poston, Furlong, & Mercado, 1989). Style of counseling preference by Chinese clients (Exum & Lau, 1988) may be more attributed to an unconscious belief in ethnic similarity (behaviors and traits) than counselors understand.

The results of this study suggest that personality traits and behaviors influence how comfortable one feels with another. These traits and behaviors, in turn, may evoke feelings of trust and openness so needed in the counseling experience. Although nonconclusive, this is certainly a source of further inquiry on a larger scale. A study with a larger sample could lead to greater understanding about how the culturally sensitive counselor can provide better guidance to troubled Chinese college students. It would be useful to replicate the study in the United States.

Chinese and American students have similar concepts of various personality traits. Chinese students reportedly felt more comfortable with the national group that was more similar to their self-image, while Americans felt more comfortable and associated with those that were more similar to themselves. Counselors must better understand the stereotypes held by both Chinese and American students and how close friendships are formed. This information can prove useful in the counseling interaction, since rapport and trust are so intricately tied to the image the counselor exudes.

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Persistence Rate of College Freshmen With Declared Majors

Sandra K. Brodwin and Martin G. Brodwin

A major issue facing colleges and universities is the high percentage of students who drop out of school and fail to return and graduate. This study analyzed the relationship between the processes freshman students used to declare a college major (rational versus arbitrary decision-making processes) and the rate for which they registered for units in the following quarter (persistence).

Forty-one percent of all students entering 2- and 4-year colleges never graduate (Tinto, 1987). Reasons cited in the literature for this dismal persistence rate include boredom, skepticism about a college major or career choice, lack of preparation for the academic requirements of college, difficulty with the transitions from high school and family to college life, feelings that college course work is not relevant to real life, and not knowing what to expect from the college experience (Levits & Noel, 1989; Hallberg, Hallberg, & Sauer, 1993). The issue of student retention and the provision of preventive and remedial programs through an intergenerational approach was described by Gold (1995).

Nelson (1992) reported that approximately 80% of college students have not persisted in their commitment to attend college, to graduate in a particular major, or to enter a chosen career. Committing to a college major is one way of defining the beginning of a person's career objective. Choosing a college major supposedly involves investigating and gathering information. American society appears to have accepted the general notion that part of adulthood is the selection of a career or a college major. Thus, by certain standards, freshmen who fall into the 41% of students who drop out of college their first year begin their adult lives having failed.

When a college major has been declared, there is a greater readiness to take risks and greater willingness to persist at difficult tasks because success seems more likely (Chickering, 1969). Other factors that are critical for persistence are autonomy (making decisions for oneself rather than relying on parents or peers) and a sense of direction or purpose (Higbee & Dwinell, 1992). A research project conducted at Ohio State University found that students who did not receive information on choosing majors were less likely to graduate and more likely to withdraw or be dismissed from the university (Steele, Kennedy, & Gordon, 1993). In a study of vocational indecision and college major indecision, Bergeron and Romano (1994) found a relationship between students being able to make a decision on a major and deciding on a vocation or career.

A study conducted by the Illinois Community College Board (1987) showed that more women than men graduated from college with degrees or certificates. Another study by Knoell (1983) found that women persisted at rates as high or higher than men. However, studies by Anderson and Darkenwald (1979) and Doan, Friedman, and Teklu (1986) found that men tended to persist at higher rates than women. Bergeron and Romano (1994)

Sandra K. Brodwin is Assessment Center Manager, Glendale Job Training Partnership Act Program, Glendale, California.

Martin G. Brodwin is Associate Professor, Division of Administration and Counseling, School of Education, California State University at Los Angeles.

reported results indicating no gender differences in their study of decision making, self-efficacy, and educational indecision.

The major hypothesis for this study was that freshmen who used rational processes for declaring college majors would have a higher persistence rate to a second quarter, as defined by registering for a second quarter, than freshmen who used arbitrary processes for declaring college majors. The secondary hypothesis, which seemed warranted because of the conflicting results from prior research, was that there would be no significant difference between the persistence of male and female freshmen.

This study analyzed the relationship between the decision-making processes freshman students use to declare college majors (rational vs. arbitrary) and the persistence rate from the first to the second quarter of the academic year, defined as registering for a second quarter.

Definition of Terms

Rational processes are those a student uses to reach a conclusion based on logical decision-making principles, including gathering information, establishing criteria, and selecting the best alternative. Rational processes, for this study, rely on information from one or all of the following: paid and volunteer work experiences, scholastic testing, professional advisement, mentoring, and occupational and career literature.

Arbitrary processes are conclusions reached based on external pressures encompassing either one or both of the following: (a) family pressure—influences imposed upon the freshmen by significant others or members of the household; or (b) peer pressure—as it is used here it can be attitudinal, behavioral, or a student's perception of another's expectation of him/her. A peer is a social equal, functions at a similar level of behavioral complexity, and is similar in age (Sigelman & Shaffer, 1991).

Method

Subjects

The subjects were freshman students entering a major metropolitan university during the fall 1991 quarter who had already declared college majors. The sample consisted of 127 males and 263 females. This incoming freshman class included the following ethnic/racial groups: Mexican American, 37%; Asian American, 33.3%; White, 11.3%; African American, 6.5%; American Indian, 0.9%; and other groups, 14.4%.

Procedure

Nine hundred one freshman students entering the university in fall 1991 were administered the Student Information Form (SIF) (Astin, Dey, Korn, & Riggs, 1991) during student orientation. Instructions were given verbally by representatives of the university Academic Information Services and in writing on the questionnaire.

Five hundred eleven of the students failed to provide essential information on the survey and had to be eliminated from the sample. Thus, there were 390 subjects, which represented 43% of the entering freshmen.

There was no time limit for completing the information form; students typically completed the form within 45 minutes. The SIF consisted of 49 questions. Six were used for the current study on persistence; the other questions on the survey did not relate to this study. Initially, each of the six questions was reviewed and a determination made as to which item within each question indicated a rational process (R) and which indicated an arbitrary process (A), as follows:

1. Since leaving high school, have you ever taken courses at any other institution?
For Credit - Not For Credit
(A) No.
(R) Yes, at a junior or community college.
(R) Yes, at a 4-year college or university.
(R) Yes, at some other postsecondary school (for example, technical, vocational, business).
2. In deciding to go to college, how important to you was each of the following reasons?
(Mark *one* answer for each possible reason).
V = Very important
S = Somewhat important
N = Not important
- | | | | |
|--|---|---|---|
| (A) My parents wanted me to go. | V | S | N |
| (A) I could not find a job. | V | S | N |
| (A) Wanted to get away from home. | V | S | N |
| (R) To be able to get a better job. | V | S | N |
| (R) To gain a general education and appreciation of ideas. | V | S | N |
| (R) To improve my reading and study skills. | V | S | N |
| (A) There was nothing better to do. | V | S | N |
| (R) To make a more cultured person. | V | S | N |
| (R) To be able to make more money. | V | S | N |
| (R) To learn more about things that interest me. | V | S | N |
| (R) To prepare myself for graduate or professional school. | V | S | N |
3. During your last year in high school, how much time did you spend during a typical week doing the following activities? 0; Less than 1 hour; 1-2 hr.; 3-5 hr.; 6-10 hr.; 11-15 hr.; 16-20 hr.; Over 20 hr. per week.
- (R) Studying/homework.
(A) Socializing with friends.
(R) Talking with teachers outside of class.
(R) Exercising/sports.
(A) Partying.
(R) Working for pay.
(R) Volunteer work.
(R) Student clubs/groups.
(A) Watching television.
4. Below are some reasons that might have influenced your decision to attend this particular college. How important was each reason in your decision to come here? (Mark one answer for each possible reason.)
V = Very important
S = Somewhat important
N = Not important
- | | | | |
|---|---|---|---|
| (A) My relatives wanted me to come here. | V | S | N |
| (R) My teacher advised me. | V | S | N |
| (R) This college has a good reputation for its social activities. | V | S | N |
| (R) I was offered financial assistance. | V | S | N |
| (R) This college offers special educational programs. | V | S | N |
| (R) This college has low tuition. | V | S | N |

- | | |
|--|-------|
| (R) My guidance counselor advised me. | V S N |
| (R) I wanted to live near home. | V S N |
| (A) A friend suggested attending. | V S N |
| (A) A college representative recruited me. | V S N |
| (R) The athletic department recruited me. | V S N |
| (R) This college's graduates gain admission to top graduate/professional schools. | V S N |
| (R) This college's graduates get good jobs. | V S N |
| (R) I was attracted by the religious affiliation/orientation of the college. | V S N |
| (R) I wanted to go to school about the size of this college. | V S N |
| (R) I was attracted by the racial/ethnic makeup of the student body at this college. | V S N |
| (A) Not accepted anywhere else. | V S N |
5. Which of the following best describes the vocational guidance you have obtained?
- (A) a. I did not obtain vocational guidance from any sources (people, literature, or courses).
- (R) b. I obtained vocational guidance primarily from reading literature (other than college catalogs).
- (R) c. I received vocational guidance counseling through a family member.
- (R) d. I received vocational guidance counseling through my high school guidance counselor or a teacher.
- (R) e. I received vocational guidance from another source.
6. Which of the following influenced your choice of college major *most* (mark only one)?
- (A) a. I have not chosen a major.
- (R) b. A previous or current job.
- (R) c. Information about the availability of jobs.
- (R) d. The potential salary I could earn.
- (R) e. Parents or friends.

Results

The present study investigated the relationship of decision-making processes which freshman students entering a 4-year urban university used in determining their college majors, to their persistence to a second quarter of study at the same institution. The Student Information Form was used to identify either a rational decision-making or an arbitrary decision-making process. A score based on selected items was then compared to persistence or lack of persistence to the second (winter 1992) quarter. The variables used in the analysis included a total rational decision-making score, a total arbitrary decision-making score, and registration for a second quarter. The study also analyzed persistence based on the additional factor of gender; *t*-tests were used to analyze each hypothesis.

The major hypothesis for this study was that freshmen who used rational processes for declaring college majors would have a higher persistence rate to a second quarter (registration for the subsequent quarter) than freshmen who used arbitrary processes for declaring college majors. Although the trend was in the expected direction, no signifi-

cant difference was found between freshmen who used rational decision making processes ($M = 14.11$) and those who used arbitrary decision making processes ($M = 13.81$) in registering for the following quarter ($t = -1.86$; $p = .064$).

A secondary hypothesis was that there would be no significant difference between the persistence rates of male freshmen and persistence rates of female freshmen. This hypothesis was tested by the use of t -tests with gender as the independent variable and with the number of units for which the students registered in a second subsequent quarter as the dependent variable. Using the separate variance estimate (Welch's test for unequal variance), the t -test for gender and persistence was significant ($t = -2.11$; $p = .036$), with women registering for more units ($M = 14.01$) than men ($M = 13.33$). The data indicated that female freshmen persisted in a second quarter at a greater rate than did male freshmen.

An analysis of the persistence of male versus female freshmen attending orientation for the fall 1991 quarter was completed. In the sample ($N = 390$), 127 men (32.6%) and 263 women (67.4%) provided information needed to complete a statistical analysis of their persistence in the second quarter, as defined by registration for the winter quarter. The data indicated that significantly more women in the sample registered for the second quarter than did men.

Discussion

Data from freshman students were evaluated to determine if persistence rate would be affected by the use of rational or arbitrary decision-making processes in choosing college majors. The results indicated that there was no significant difference in persistence between the two groups based on the use of different processes. Freshman students with majors chosen based on rational decision-making factors and freshman students choosing college majors based on arbitrary decision-making factors persisted in the second quarter at the same frequency. The process employed by a student to choose a college major, as measured by this study, does not appear to have an effect on the persistence rate of that student.

Other factors have been suggested as affecting a student's persistence in college, including a student's time management ability, the mindset of the student toward a class assignment, the student's involvement in non-academic aspects of college, family support of the student's decision-making process, the student's knowledge and ability to utilize efficient study skills, the competence of the student to identify and use campus resources, and within-group diversity relating to a sense of belonging (Bergeron & Romano, 1994; Hallberg et al., 1993; Steward, Gimenez, & Jackson, 1995).

Once a student begins attendance at a university or college, these factors may offset those previously used by the student to choose a college major identified at freshman orientation. This effect suggests that counselors, teachers, and parents might work together to establish a formal program which addresses these factors in addition to the process followed to choose a major.

Part of that affective curriculum might include the provision of classes for parents of high school students addressing the following issues: control versus responsibility, ways to provide support in decision making, and support for the student's need for study time. The practice of teaching study skills and a core element of these skills, time management, is another basis for teamwork for the teaching and counseling staff. Such skills could be included in the curriculum in high school. Based on information provided by Hallberg et al. (1993), time management and study skills are components of success for students attempting to complete their higher education degrees.

Conclusion

No significant difference was found in the persistence rate of incoming freshman students with college majors who declared with rational decision-making processes and those who declared with arbitrary decision-making processes. The data, however, showed that female freshman students with declared college majors persisted to a second consecutive quarter at a significantly higher rate than did male freshman students with declared college majors.

This study suggests that high school and college personnel should focus on factors other than the process employed to choose a major to effect improved persistence in college. Some important matters to address were delineated by Hallberg et al. (1993), as described earlier. Other factors that are critical for persistence are learning to make decisions for oneself rather than relying on parents or peers and a sense of direction or purpose (Higbee & Dwinell, 1992). The results of this study appear to coincide with the implications for career counselors reached by Bergeron and Romano (1994) regarding working with perceptions of oneself and career choices available based on gender appropriateness to impact the persistence rate. Persistence may also be impacted by freshman orientation programs designed to help with career exploration, selecting a college major, and the effects of family identity on student retention (Gold, 1995; Tomlinson-Clarke, 1994). Based on these factors, it is suggested that group counseling with peers be introduced at all education levels as a school-to-work portion of the curriculum. At the college level, counselor training courses are encouraged to include gender issues (Brodwin & Havranek, in press).

The fact that women persisted at a higher rate than men in this study needs further exploration. Prior studies on gender and persistence found conflicting results. This study did not provide data to explain why women persisted to a second term at a significantly higher rate than men. This result may have occurred at this particular university; further investigation at other colleges and universities would be useful.

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*We must become brave hearts
willing to put in hard work
on quality products.*

— Sara Elizabeth Culmone

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Job Satisfaction Among Full-time Counselors in California Community Colleges

David L. Baird and David L. Inglis

Full-time California community college counselors reported moderate satisfaction with their jobs, identified job satisfiers as intrinsic and job dissatisfiers as extrinsic, and identified job issues that affect satisfaction. The authors present recommendations and conclusions.

Full-time counselors in California community colleges have been affected by external state legislative mandates and the state's current fiscal budget restraints. It is important to understand how these mandates and fiscal restraints affect counselors' job satisfaction. Evidence seems clear that community college counselors' job satisfaction may play a significant role in how successfully counselors implement state mandates and other aspects of their position.

Past studies have examined the level of job satisfaction among both full-time and part-time community college faculty in various parts of the United States (Carleo, 1989; Chung, 1989; Cohen, 1974; Friedlander, 1978; Inglis, 1991; Riday, 1985). Further, Coll (1989) reported his findings from a study of factors that contribute to job satisfaction and role congruence of community college counselors in the state of Oregon. The authors found no studies which reported findings concerning the level of job satisfaction among full-time California community college counselors.

This study examined for the first time the current level of job satisfaction of a group of full-time California community college counselors. It also identified selected demographic data and determined if there are significant differences in the level of counselor job satisfaction based on selected counselor demographics. Finally, it investigated the relationship between counselors' job satisfaction and their perceptions of selected job issues.

The results of this study can assist full-time California community college counselors, their professional counseling organization, and administrators in charge of counseling programs in developing programs and services that will positively affect counselor job satisfaction and, thus, potentially increase counselors' job effectiveness.

Method

The purpose of this study was to determine the general level of job satisfaction of full-time California community college counselors as related to selected demographics and to counselors' perceptions of selected job issues. The study was designed to answer the following questions: What is the overall level of job satisfaction among full-time California community college counselors? What are major job satisfiers and dissatisfiers? What are the selected demographics of full-time California community college counselors? What are the perceptions of full-time California community college counselors regarding selected job issues on their job performance? What are the significant relationships between level

David L. Baird is Dean of Counseling and Matriculation Officer, Golden West College, Huntington Beach, California.

David L. Inglis is Dean of Educational Services (Retired), Chaffey Community College, Rancho Cucamonga, California.

of job satisfaction among full-time California community college counselors and the perceived effect selected job issues have on their job performance?

Participants

Full-time tenured and tenure-track California community college counselors who belonged to the California Community Counselors Association (CCCCA) during spring 1994 ($N = 201$) were surveyed. One hundred thirty-one respondents (65%) completing questionnaires were identified as full-time tenured or tenure-track counselors.

Instrumentation

Data were collected using the 20-item short-form Minnesota Satisfaction Questionnaire (MSQ) with a questionnaire designed by the researchers. The MSQ measures job satisfaction as follows: 1 = very dissatisfied, 2 = dissatisfied, 3 = neither satisfied nor dissatisfied, 4 = satisfied, and 5 = very satisfied. It was used to measure the general level of job satisfaction and to determine major job satisfiers and dissatisfiers among full-time California community college counselors. The researcher-designed 15-item questionnaire was used to gather selected demographic data (tenure status, age, gender, number of years employed as a full-time counselor, salary range, highest degree earned, and race or ethnicity) and counselor perceptions regarding selected job issues (individual workload, matriculation mandates, shared governance, affirmative action, and staff development mandates, increasing student diversity, need to have a better definition of "counseling" as a discipline, and the effect of fiscal constraints).

The MSQ and the researcher-developed questionnaire were reviewed by four widely recognized, long-time experts in the counseling profession in California. Each expert considered the MSQ to be a valid instrument for measuring counselor job satisfaction and believed the researcher-developed questionnaire would generate valid data concerning counselor demographics and perceptions regarding selected job issues. The short-form MSQ has a median reliability coefficient of .90 for general satisfaction (Weiss, 1967).

Field tests were conducted in which both questionnaires were administered to 17 full-time counselors from four different California community colleges. Recommendations for changes by the reviewers and field test participants were incorporated into the study.

Demographics

Among the 131 participants, 123 were tenured (94%), 107 were 41 - 60 years old (82%), 85 were female (65%), 66 had been employed as full-time counselors for over 10 years (50%), 98 were earning over \$50,000 a year (73%), 111 had earned master's degrees (85%), 86 were white/Caucasian (66%), and females outnumbered males 85 to 46 (65% to 35%).

Results

Overall Job Satisfaction

Counselors in California community colleges seem to be moderately satisfied with their jobs. Job satisfaction survey results revealed that the overall mean for general job satisfaction was 3.68. This falls slightly more than halfway between N (neither satisfied nor dissatisfied) and S (satisfied) on the MSQ 5-point Likert scale. For this study, general job satisfaction consisted of responses to all 20 items of the MSQ. Satisfiers were identified as responses to points 1 and 2 (very dissatisfied and dissatisfied) on each item of the MSQ.

Counselors in this study indicated the greatest satisfaction with the following five individual MSQ items: (a) "chance to do things for others" ($M = 4.64$), (b) "way my job provides for steady employment" ($M = 4.49$), (c) "feeling of accomplishment I get from the job" ($M = 4.32$), (d) "chance to do something that makes use of my abilities" ($M = 4.15$), and (e) "chance to do different things" ($M = 4.15$).

The five items with the greatest mean satisfaction were identified with intrinsic job satisfaction, while the five items with the lowest mean satisfaction were identified with extrinsic job satisfaction (see Table 1).

Table 1

Top Five Items with Highest Mean Job Satisfaction Levels

Item	Frequency of response					M	SD
	VD	D	N	S	VS		
1. Chance to do things for others	0	1	3	37	89	4.64	.569
2. Way my job provides for steady employment	1	4	9	53	61	4.32	.803
3. Feeling of accomplishment I get from the job	1	4	9	53	61	4.32	.803
4. Chance to do something that makes use of my abilities	2	13	5	48	60	4.18	1.01
5. Chance to do different things from time to time	4	8	6	56	54	4.15	.992

Note. Frequency of response key: VD = very dissatisfied; D = dissatisfied; N = neither; S = satisfied; VS = very satisfied.

Satisfiers and Dissatisfiers

The five principal satisfiers (response to points 4 and 5 on the short-form MSQ) were identified as follows: (a) "chance to do things for other people," (b) "way my job provides for steady employment," (c) "feeling of accomplishment I get from the job," (d) "freedom to use my own judgment," and (e) "chance to try my own methods of doing the job" (see Table 2).

Table 2

Five Principal Job Satisfiers Ranked from Highest to Lowest for California Community College Counselors

Item	D**D**			S* S*		S*	%	D**	%
	1	2	3	4	5				
1. Chance to do things for other people	0	1	3	37	89	126	96.1	1	.8
2. Way my job provides for steady employment	0	2	5	50	73	123	93.9	2	1.5
3. Feeling of accomplishment I get from the job	1	4	9	53	61	114	87.1	5	3.9
4. Freedom to use my own judgment	3	8	4	67	47	114	87.0	11	8.4
5. Chance to try my own methods of doing the job	5	8	4	74	39	113	86.3	13	9.9

Note. * S = satisfiers; **D = dissatisfiers.

The five principal dissatisfiers (responses to points 1 and 2 on the short-form MSQ) were identified as follows: (a) "way college policies are put into practice," (b) "way my boss handles his/her workers," (c) "competence of my supervisor in making decisions," (d) "way my co-workers get along with each other," and (e) "chances for advancement on the job (see Table 3).

Table 3

Five Principal Dissatisfiers Ranked from Highest to Lowest for California Community College Counselors

Item	D**D**			S* S*		S*	%	D**	%
	1	2	3	4	5				
1. Way college policies are put into practice	26	53	29	20	1	21	16.1	79	60.3
2. Way my boss handles his/her workers	34	23	19	39	16	55	42.0	57	43.6
3. Competence of my supervisor in making decisions	31	25	19	48	8	56	42.7	56	42.8
4. Way my co-workers get along with each other	9	33	24	52	13	65	49.6	42	32.1
5. Chances for advancement on the job	14	24	38	43	10	53	40.4	38	29.1

Note. * S = satisfiers; **D = dissatisfiers.

Each of the top five satisfiers was characterized as intrinsic, and each of the top five dissatisfiers was characterized as extrinsic. These results correspond to Herzberg's two-factor theory, which links job satisfaction to an employee's intrinsic needs and job dissatisfaction to an employee's extrinsic needs (Herzberg, 1993).

Counselor Demographics

Questionnaire results revealed that nearly two-thirds (64%) of the respondents had been working as full-time California community college counselors for 15 years or less. Two-thirds (66%) of the counselors responding to the questionnaire identified themselves as White/Caucasian. The remaining one-third identified themselves as Hispanic (15%), African American/Black (8%), Asian/Pacific Islander (8%), and Other (3%).

Comparison of Job Satisfaction to Demographics

A statistical comparison of the data revealed no significant differences between the overall level of job satisfaction and the demographic characteristics of the respondents.

Counselor Perceptions of Job Issues

California community college counselors reported that their workload was heavy, AB 3 matriculation mandates were greatly affecting their job, there was a great need for a better definition of the discipline of counseling at the community college level, and current fiscal restraints in their own college districts were having a significant effect on their counseling duties and responsibilities. They were less sure that AB 1725 shared governance mandates or the increasing diversity of students being served at their colleges were affecting their counseling duties and activities.

Comparison of Job Satisfaction to Perceptions of Job Issues

A comparison of the relationship between the level of overall job satisfaction and perceptions of selected job issues revealed a significant negative relationship between counselors' job satisfaction and counselors' perceptions of the following job issues:

1. Individual counseling workload.
2. Increasing diversity of student population being served by counselors.
3. Need for the discipline of counseling to be defined better at the community college level.
4. Effect of current California community college fiscal restraints on counseling duties and responsibilities.

Although the correlation coefficients generated showed low statistical relationships, it is important to note that relationships did exist and that they were significant (see Table 4).

Table 4

Summary Relative to Job Satisfaction of California Community College Counselors and Their Perceptions of Selected Job Issues

Variable	Value	Critical value	Result
Individual counseling workload	-.2097*	.159	Low negative relationship
AB 3 matriculation mandates	-.0498	.159	No significant relationship
AB 1725 shared governance mandates	-.1223	.159	No significant relationship
Increasing diversity of student population served by counselors	-.2013*	.159	Low negative relationship
Need for the discipline of counseling at the community college level to be better defined	-.2905**	.159	Low negative relationship
Effect of current community college fiscal restraints	-.2354**	.159	Low negative relationship

Note. * Significant at .05 level; ** significant at .01 level.

No significant relationships were found between job satisfaction and the effect AB 3 matriculation mandates and AB 1725 shared governance mandates were having on counselors' duties and responsibilities.

Recommendations

The authors recognize that this study was limited to full-time tenured or tenure-track California community college counselors who were members of CCCCA during spring 1994. Nevertheless, the authors believe that the following recommendations are applicable to the needs of all California community college counselors and the counseling profession in general:

1. Counselors need to examine their own working relationships and develop goals and activities to strengthen and improve those relationships.
2. Counselors, working in conjunction with administrators, should continue efforts to increase the number of underrepresented minorities employed as full-time counselors in California community colleges.
3. Counselors and administrators in charge of counseling programs should examine the workload of counselors, particularly as it pertains to matriculation mandates. Further, there is a need to develop alternatives to current workload levels to allow counselors to work more effectively and efficiently toward fully meeting students' needs.
4. Effect of current California community college fiscal restraints on counseling duties and responsibilities.
5. Counselors throughout the California Community College system should work co-operatively to identify means to obtain sufficient funding to provide the necessary services to help ensure student success.

Conclusions

The overall mean score of 3.68 on the MSQ identified full-time tenured or tenure-track California community college counselors as being moderately satisfied with their jobs.

As compared to the results of other studies (Coll, 1989; Keim, 1986), it appears that California community college counselors as a group are becoming more racially and ethnically diverse.

Among the participants in the study there were relatively low numbers of counselors employed five years or less on the job (18%) and under 40 years old (11%). These facts could have affected the analysis of such variables as tenure, status, age, and length of time on the job in relation to job satisfaction.

There are several areas of concern for counselors. Their job satisfaction level could be affected by their perceptions concerning workload, matriculation mandates, counselor role clarification, and budget constraints. These factors may account for the fact that their job satisfaction mean of 3.68 was somewhat lower than the job satisfaction mean for counselors in Coll's (1989) study.

The following four job issues had a significant negative direction in relationship to counselor job satisfaction: individual workload, increasing diversity of students, need for the discipline of counseling at the community college level to be better defined, and effect of fiscal restraints on counselors' duties and responsibilities. These factors suggest the potential, unless circumstances change, for continued erosion of counselor job satisfaction. Further, these results were surprising as the authors did not anticipate a negative correlation between job satisfaction and the selected job issues cited above.

Counselors are not satisfied with the working relationships they have with their peers and counseling administrators. These relationships appear to have a negative effect on counselors' overall level of job satisfaction.

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Organizational Commitment Among California's Public Rehabilitation Counselors

Jamie Satcher and Marcheta McGhee

This study explored affective, normative, and continuance levels of organizational commitment among 223 public rehabilitation counselors in California. Results indicate that public rehabilitation counselors operated primarily from a continuance component of commitment, and that behaviors associated with conscientiousness were significant predictors of both affective and normative commitment. The authors recommended enhancing affective and normative commitment by rewarding work behaviors that are predictive.

Organizational commitment describes the strength of a person's identification with and involvement in an organization (Steers, 1977). Higher levels of organizational commitment have been associated with positive work behaviors and attitudes and have been found to result in increased organizational effectiveness (Randall, Fedor, & Longenecker, 1990). The more that employees feel commitment to the organization, the more likely they are to expend energy on behalf of the organization.

Current conceptualizations indicate that organizational commitment has three components: affective, normative, and continuance (Meyer & Allen, 1987, 1991; Meyer, Allen, & Smith, 1993). Although an employee may experience all components concurrently, each component has implications for why employees expend energy on behalf of their employing organization.

The emotional attachment that an individual has for his or her organization comprises the affective component of organizational commitment. Affective commitment is characterized by (a) a strong belief in and acceptance of the organization's goals and values, (b) a willingness to exert considerable effort on behalf of the organization, and (c) a strong desire to maintain membership in the organization (Porter, Steers, Mowday, & Boulian, 1974). Persons operating primarily from the affective component expend energy on behalf of the organization because they *want to* (Allen & Meyer, 1990).

The moral obligation that an individual may feel to continue working for an organization constitutes the normative component of organizational commitment. This component is characterized by the exertion of effort out of feeling of loyalty: The individual continues working for the organization because it is viewed as the right and moral thing to do (Wiener, 1982). Persons operating primarily from the normative component expend energy on behalf of their organization because they feel they *should* (Allen & Meyer, 1990).

Continuance commitment refers to the perceived costs that the individual may attach to leaving his or her organization. This component is characterized by the exertion of effort on behalf of the organization to gain rewards or minimize costs. The individual continues working for the organization because the alternatives, such as loss of income and benefits, are perceived as too high (Randall, Fedor, & Longenecker, 1990). Persons who operate primarily from the continuance component expend energy on behalf of their organization because they feel they *need to* (Allen & Meyer, 1990).

Jamie Satcher is Associate Professor, Rehabilitation Counselor Education, The University of Alabama, Tuscaloosa.

Marcheta McGhee is Assistant Professor, Counseling, Leadership, and Special Education, Auburn University at Montgomery, Montgomery, Alabama.

Antecedents of Organizational Commitment

Affective commitment has been the most widely studied component of organizational commitment, with most research being conducted in the business fields. The emphasis of prior research has been on the antecedents and consequences of affective commitment. Older workers, males, and those with lower educational levels have been found to have higher levels of affective commitment (Glisson & Durick, 1988; Morrow & McElroy, 1987; Mottaz, 1988; Pierce & Dunham, 1987). The more workers feel in control of the work they are doing, the higher their affective commitment (Luthans, Baack, & Taylor, 1987). Affective commitment has also been positively linked to decentralization of decision making (Brooke, Russell, & Price, 1988), reward equity, supervisor consideration, and perceived organizational support (Allen & Meyer, 1990; DeCotiis & Summers, 1987; Eisenberger, Fasolo, & Davis-LaMastro, 1990).

Age and tenure have been linked to continuance commitment, with older workers and tenured workers reporting that they work primarily because they need to (Meyer & Allen, 1991). Familial, cultural, and organizational socialization which stresses loyalty to the organization, while not empirically validated, are presumed antecedents of normative commitment (Meyer & Allen, 1991).

Consequences of Organizational Commitment

Affective organizational commitment has been negatively correlated with turnover and tardiness (Angle & Perry, 1981; Mathieu & Zajac, 1990; Steers, 1977). The less their affective commitment to their organizations, the more likely employees are to leave the organization and to display negative work behaviors. Higher levels of organizational commitment have been found to be positive predictors of attendance (Mathieu & Zajac, 1990), quantity of work (Steers, 1977), and readiness for promotion (Steers, 1977). Research using the three-component model has yielded positive correlations of work performance with affective commitment and negative correlations of work performance with continuance commitment (Meyer, Paunonen, Gallatly, Goffin, & Jackson, 1989). Randall, Fedor, and Longenecker (1990) expanded on previous research by using the three-component model to identify the behavioral consequences of organizational commitment. They found increased work quality, sacrifice, and sharing behaviors to be positive outcomes of both normative and affective commitment.

Organizational Commitment and Rehabilitation Counseling

Few empirical studies have investigated organizational commitment among rehabilitation counselors. Emener and Stephens (1982) described many areas important to organizational commitment, particularly how rehabilitation organizations can establish work environments that contribute to quality of work life. Kelley and Satcher (1992) described how organizational commitment could be fostered through enhancing organizational support. A quantitative study of rehabilitation counselors in New Zealand identified organizational commitment as a positive contributor to job satisfaction (Biggs, Flett, Voges, & Alpass, 1995).

While it is known that organizational commitment influences quality of work life and work performance, little is known about the organizational commitment of public rehabilitation counselors. The purpose of this study was to explore the organizational commitment of California's public rehabilitation counselors. The following questions guided the research: (a) What are the affective, normative, and continuance commitment levels of California's public rehabilitation counselors? and (b) Can California's public rehabilitation counselors' affective, normative, and continuance commitment levels be predicted using the following variables: age, years worked as a counselor with the agency,

status as Certified Rehabilitation Counselor, education, conscientiousness, initiative, cooperation, and attendance/punctuality?

Method

Participants

The participants in this study were 435 rehabilitation counselors working for the public rehabilitation agency in California. Each counselor working in California's public rehabilitation agency was mailed a survey instrument and cover letter assuring them of the confidentiality of their responses. Of the 435 counselors surveyed, 223 returned instruments for a response rate of 51%.

The counselors ranged in years of employment as a counselor in California from 1 month to 28 years, with a mean of 9.86. They ranged in age from 21-70 years, with a mean age of 44.19. Over one-half (55%) of the counselors had master's degrees or higher. The minority (15%) were Certified Rehabilitation Counselors.

Instrumentation

Organizational commitment was measured using the Organizational Commitment Scales developed by Allen and Meyer (1990). This instrument, which can be found in Table 1, has 24 items designed to measure affective, normative, and continuance commitment. Participants are asked to respond to each item using a Likert-type scale ranging from 1 = strongly disagree to 7 = strongly agree.

Previous researchers using these scales have found reliability coefficients ranging from .74-.89 (Affective), .69-.79 (Normative), and .69-.84 (Continuance) (Allen & Meyer, 1990). For the current study, the wording of items was changed as much as possible to reflect an agency, rather than business, orientation. For example, item 1 under Affective commitment was changed from "I would be happy to spend the rest of my career with this organization" to "I would be happy to spend the rest of my career with this agency." Reliability coefficients from a national study of rehabilitation counselors (Satcher & McGhee, 1995) were as follows: Affective, .66; Normative, .70; Continuance, .75.

The protocol used for identifying the behaviors studied (i.e., cooperation, conscientiousness, initiative, attendance/punctuality) followed that of Randall et al. (1990), who examined the behavioral expression of organizational commitment. A national sample of public rehabilitation counselors was given a list of 15 work behaviors. These counselors were asked to respond to each work behavior using a scale ranging from 1 = strongly disagree to 5 = strongly agree. The responses were then subjected to factor analysis with varimax rotation to identify work behavior groupings. Only those behaviors with a factor loading of .60 or higher were included in each group. Work behavior groupings based on the national study by Satcher and McGhee (1995) can be found in Table 2.

Results

Question 1: Primary Commitment

The first research question was answered by examining the mean scores of the participants. The range of possible scores for each component of organizational commitment was from 8-56. After deletion of surveys because of missing data, California's public rehabilitation counselors' primary commitment was continuance ($n = 217$, $M = 37.01$, $SD = 9.69$) followed by affective ($n = 215$, $M = 33.78$, $SD = 7.21$) and normative ($n = 218$, $M = 28.73$, $SD = 6.65$).

Multiple *t*-tests were used to compare differences among the three components of commitment. It is appropriate to use multiple *t*-tests to contrast group means as long as

Table 1***Organizational Commitment Scales***

Commitment	Item
Affective	<ol style="list-style-type: none"> 1. I would be very happy to spend the rest of my career with this agency. 2. I enjoy discussing my agency with people outside of it. 3. I really feel as if this agency's problems are my own. 4. I think I could easily become as attached to another agency as I am to this one. (R) 5. I do not feel like "part of the family" at my agency. (R) 6. I do not feel "emotionally attached" to this agency. (R) 7. This agency has a great deal of personal meaning for me. 8. I do not feel a strong sense of belonging to my agency. (R)
Normative	<ol style="list-style-type: none"> 1. I think that people these days move from company to company too often. 2. I do not believe that a person must always be loyal to his or her organization. (R) 3. Jumping from organization to organization does not seem at all unethical to me. (R) 4. One of the major reasons why I continue to work for this agency is that I believe loyalty is important and therefore feel a sense of moral obligation to remain. 5. If I got another offer for a better job elsewhere, I would not feel right to leave my agency. 6. I was taught to believe in the value of remaining loyal to one organization. 7. Things were better in the days when people stayed with one organization for most of their careers. 8. I do not think that wanting to be a "company man" or "company woman" is sensible anymore. (R)
Continuance	<ol style="list-style-type: none"> 1. I am not afraid of what might happen if I quit my job without having another lined up. (R) 2. It would be very hard for me to leave my agency right now, even if I wanted to. 3. Too much in my life would be disrupted if I decided to leave my agency right now. 4. It would be too costly for me to leave my agency in the near future. (R) 5. I feel that I have too few options to consider leaving my agency. 6. Right now, staying with my agency is a matter of necessity as much as desire. 7. One of the few negative consequences of leaving this agency would be the scarcity of available alternatives. 8. One of the major reasons why I continue working for this agency is that leaving would require considerable personal sacrifice—another organization may not match my overall benefits here.

Note: R denotes items reversed for scoring.

Note: Adapted from "The Measurement and Antecedents of Affective, Continuance and Normative Commitment to the Organization," by N. J. Allen and J. P. Meyer, 1990, *Journal of Occupational Psychology*, 63, pp. 1-18. Used with author permission.

familywise error rate is considered (Howell, 1987). To control for familywise error in the three comparisons made, the probability level was set at .02. Significant differences were found between affective commitment and both normative commitment, $t(1,214) = 10.27$, $p < .01$, and continuance commitment, $t(1,214) = -6.56$, $p < .01$. A significant difference was also found between normative and continuance commitments, $t(1,217) = 18.36$, $p < .01$.

Table 2
Work Behavior Groupings

Group	Work behavior
1. Conscientiousness	I pay attention to details at work. I do my work thoroughly and completely. I have a concern for quality.
2. Initiative	I am willing to volunteer for tasks. I give personal time to the agency. I show enthusiasm about my work. I am willing to take on extra responsibility.
3. Cooperation	I share knowledge and information with others. I offer work suggestions to others.
4. Attendance/ Punctuality	I am late for work. I am absent from work.

Question 2: Predictors of Commitment

The second question was answered using a stepwise multiple regression analysis for each of the components of commitment studied. The significant results of these analyses are shown in Table 3. The strongest predictor of affective commitment was conscientiousness. As California's rehabilitation counselors' conscientiousness increased, so did their emotional attachment to the organization. The variable accounted for 14% of the variance associated with affective commitment.

Both conscientiousness and age were significant predictors of normative commitment. The more the counselors reported that they were conscientious workers, the higher were their levels of loyal attachment. This variable accounted for 3% of the variance associated with normative commitment.

Status as Certified Rehabilitation Counselor was a significant predictor of continuance commitment. Counselors who were not certified as rehabilitation counselors showed higher levels of continuance commitment than those who were certified. This variable accounted for 2% of the variance associated with continuance commitment.

Discussion

The overall patterns of commitment indicate that the rehabilitation counselors responding to the survey operated significantly from a continuance commitment conceptualization. This pattern may be of concern to California's rehabilitation administrators because, when employees operate primarily from a continuance model, decreased performance may be expected (Meyer et al., 1989).

Table 3***Regression Analyses: Affective, Normative, and Continuance Commitment***

Commitment	Variable	<i>B</i>	<i>SE B</i>	β	<i>T</i>
Affective	Conscientiousness	2.85	.49	.38	5.77**
Normative	Conscientiousness	1.25	.45	.19	2.75*
Continuance	Certified Rehabilitation Counselor	4.45	1.86	.17	2.38*

* $p < .05$. ** $p < .01$.

Conscientiousness was more strongly linked to affective and normative commitment than were any of the demographic variables. As reported levels of conscientiousness increased, so did the counselors report expending energy on behalf of their organization due to emotional and loyal attachments. These findings support a need for California's rehabilitation administrators to enhance and reward those conscientious behaviors that predict affective and normative commitment. They also support an administrative stance that is process, rather than outcome, oriented. Positive verbal reinforcement or letters from administrators to counselors for excellent casework, attention to details, and evidence of quality service might enhance emotional and loyal attachments to the agency. While these behaviors will typically lead to successful case closures, rewards based exclusively on outcome (e.g., number of 26 closures) rather than process may leave counselors feeling disempowered and unappreciated and may, ultimately, result in decreased work performance.

Other recommendations which might enhance affective and normative commitment include (a) not overmanaging, (b) listening to alternative approaches, (c) acknowledging accomplishments at staff meetings, (d) giving feedback, (e) writing letters of commendation, and (f) showing praise for how counselors handle the routine aspects of their jobs (Emener & Stephens, 1982; Kelley & Satcher, 1992).

Status as Certified Rehabilitation Counselor was a negative predictor of continuance commitment. Counselors who were not certified reported expending effort on behalf of the organization because they needed to more often than those who were certified. It may be that counselors who do not have certification view their options as more limited than those with certification.

Summary

The results of this study of organizational commitment among public rehabilitation counselors in California indicated that the counselors operated primarily from a continuance (need to) conceptualization of organizational commitment. Work behaviors associated with conscientiousness were positive predictors of affective and normative commitment. Because of the positive links between affective and normative commitment and quality work performance, it is recommended that agency administrators seek ways to enhance the emotional and loyal attachments of rehabilitation counselors toward their agencies. This might be accomplished by supporting those behaviors that are predictive of these components of commitment.

Many of the counselors who responded to the survey suggested qualitative interviews as a way that more information about their commitment and satisfaction might be gathered. Researchers may wish to incorporate a qualitative component to identify specific themes around which rehabilitation counselors' affective, normative, and continuance commitment center.

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Accountability in a University Counseling Center Through Total Quality Management and Qualitative Research

Phillip A. Whitner and Daniel J. Abrahamowicz

The integration of qualitative research and Total Quality Management philosophy and concepts can allow counseling center and other student development professionals to demonstrate accountability through the documentation of the quality of their programs and services.

College and university counseling centers, and higher education in general, need to become more responsive and accountable to the public (Stone & Archer, 1990). To achieve this goal, counseling center professionals will need to resolve the difficult task of integrating evidence and data into an efficient and effective managerial practice and philosophy.

The study panel of the Education Commission of the States (1986) reported that state leaders are increasingly becoming more outspoken about student preparation for college, student participation in college, and graduate preparation for a changing society. Today, many groups are calling for tangible evidence that a college experience has a positive influence and makes a difference in students' lives (Pascarella & Terenzini, 1991). According to Palmer (1993), "The day of accountability is here" (p. 314).

Based on professional options and judgments, Stone and Archer (1990) made several assumptions about trends that would occur in the external and internal environments of counseling centers. The major assumption that competition for resources in higher education would increase led the authors to conclude that "Accountability will have increasing importance . . ." (p. 543). Later, Joy-Newman, president of the American College Counseling Association, stated, "The age of accountability is here" (cited in Kimmerling, 1993, p. 5).

Application of the philosophy and concepts of Total Quality Management (TQM) and the evaluation methodologies of qualitative research can establish accountability for counselors. This paper provides a brief description of the concepts and philosophy of both TQM and qualitative research and includes examples of the approaches working in concert. One major tenet of TQM is that the focus is on the customer's needs and expectations (Meiss, 1991a, 1991b). In a campus environment, customer needs, expectations, and satisfaction can be documented, as well as programs justified through the implementation of qualitative research methods. Such documentation is extremely important for counseling center professionals because the student's (customer's) needs can be defined and satisfaction measured. In addition, tangible evidence can document the impact of the college experience and its influence on students' lives. Golden (1991) has encouraged student development professionals, including counselors, to use a growing professional agenda in their work that includes customer service, cost containment, and total quality management.

Phillip A. Whitner is Senior Staff Counselor, Division of Student Affairs, The University of Toledo, Toledo, Ohio.

Daniel J. Abrahamowicz is Dean of Students, Division of Student Affairs, The University of Toledo, Toledo, Ohio.

Total Quality Management Concepts

Total Quality Management (TQM) serves as the base managerial philosophy through which college and university counseling centers may incorporate institutional managerial requirements and qualitative research methodologies. TQM is a management philosophy that emphasizes quality and achieves it through the empowerment of each member of an organization to meet or exceed customer expectations (Cornesky, 1990; Deming, 1986; Miller, 1991). The TQM method of conducting business was proposed in the 1940s by W. C. Deming. Lack of interest in this country and the need for new and different managerial approaches for conducting business and restructuring a country were reasons Deming took his approach to Japan. In the United States TQM began more than 30 years ago in the private business sector (Meiss, 1991a, 1991b). In the last 10 years the approach has become more grounded in public service organizations and educational institutions (Coate, 1990a, 1990b; Cornesky, 1990; Miller, 1991). The spread of TQM from the private business sector to the public service/education sector has resulted in some modifications, but the basic concepts remain. The basic concepts are:

1. **Focus on Customers** – The customers are of prime importance. Quality management means identifying customer needs and meeting customer expectations.
2. **Breakthrough Planning** – The purpose is to clarify a vision for the organization and identify critical processes that are essential in delivering services to customers. Change and improvement are ongoing.
3. **Daily Management** – Workers are empowered to know and be responsible for what they must personally do to meet the goals and objectives of the organization.
4. **Commitment to Quality** – A commitment to quality means that the workers in an organization will not tolerate inadequate results. A commitment by the worker also means a willingness to invest in non-content specific activities that will have long-term payoffs.

As defined by TQM, the customers of higher education institutions include all those individuals who participate in the work of a college or university. This means there are internal customers (e.g., faculty, staff, supervisors) and external customers (e.g., students, alumni, community, legislators). Certainly, the responsibilities and work of college and university counseling centers relate to individuals from all aspects of an institution's environment. Within the context of student development, the focus of the counseling profession would be on students as customers.

Qualitative Research Concepts

The purpose of research generally dictates whether it will be conducted qualitatively or quantitatively. Qualitative research is most commonly intended to build theory or generate hypotheses. Qualitative research typically involves studies of an individual or single occurrence in detail through the use of nonnumeric, but standardized and validated, coding schemes for observational data. In general, counseling center and other student development professionals have not attended to evaluation measures of program and service effectiveness. The absence of this process is often the result of work overload accompanied by diminishing resources. Keller (1985) identified higher education scholars as the greatest inhibitors of qualitative research since they have supported the study of colleges and universities from a scientific perspective only.

The value and application of using qualitative research methods to study programs and services of higher education ecologies has only recently been strongly encouraged

(Banning, 1989; MacKay & Schuh, 1991; Patton, 1991; Rizo, 1991; Salomon, 1991; Tebes & Kraemer, 1991; Whitt, 1991). The study of student ecologies, according to Caple (1991), "... is not a system with clean boundaries. It is based on the application of human experience and what, if anything, may be done to direct and shape human development. Ill-defined concepts are more the rule than the exception" (p. 387). Caple contended no single source can produce or even facilitate a science of the development of human beings. He said, "The developing complexities of the social structure dictate that better methods of study are needed to keep pace with understanding its nature" (p. 387).

The growing recognition of the utility of qualitative research in higher education was hailed as positive by Kuh and Andreas (1991). They said, "It is time student affairs professionals entertain the use of qualitative methods in their study of students and campus life" (p. 404).

An implicit message resonated from qualitative research is that the investigation is concerned with a specific—not the general or global. If the research findings, or parts of the investigation, are found to be generalizable to other populations, then serendipitous information has been uncovered. Stated differently, the qualitative approach to research is primarily interested in the specific consumer or the customer—not other populations. Therefore, the congruence, compatibility, and general focus of both qualitative research and TQM complement their use in an integrated approach for conducting counseling center work. This approach can be used to provide tangible evidence regarding student needs, satisfaction, outcomes, and the students' utilization of programs and services.

Operationalizing the Concepts

Qualitative research and TQM have been integrated at different levels in the counseling center at The University of Toledo. Examples of integration at the individual, group, organization, and institutional levels illustrate the counseling center's commitment to major themes: (a) quality and excellence, (b) customer needs and satisfaction, (c) empowerment, (d) constant change and improvement, and (e) constant evaluation.

There are commonalities across higher education settings and examples of various managerial styles and approaches for conducting work. Each higher education institution must find its own unique managerial approach and philosophy (Kuh & Whitt, 1988; Kuh, Whitt, & Shedd, 1987). A managerial approach that integrates qualitative research and TQM concepts for conducting counseling center and student development work can produce information beneficial to students, student affairs administrators, service providers, and program developers. Although there are inherent difficulties with interpreting information and data from qualitative research methods, the methods can be rewarding because they generally provide an immediate, low-cost guide to identifying experiences and trends that may impact the quality and the excellence of the college environment. The qualitative methods will vary but the managerial philosophy, TQM, maintains its focus on the individual, expectations, and quality.

Individual

TQM and a qualitative research approach can be used to explore and explain experiences of college student life. Qualitative methods and techniques provide broad, in-depth information and personal perspectives and reactions regarding specific life experiences.

An open-minded qualitative technique, the personal essay (Giddan & Whitner, 1992), was used by counseling center professionals to obtain information about unantic-

pated experiences that influenced a college student's persistence. Essay questions and other open-ended techniques allow respondents to express their feelings and reactions in their own words, an "insider" perspective (Fetterman, 1988). The personal essay was simple to administer, required minimal statistical analysis, and produced much in-depth information. In this case, students were given a pencil and a single sheet of paper with the title, "Personal Essay." In the short instructional paragraph students were asked to describe those events or experiences that occurred unexpectedly during college. Students were also asked to provide details regarding their reactions, what they did, how they felt, and any subsequent changes.

A qualitative approach such as this can assist counseling center and other student development professionals to understand a host of substantive—personal, academic, career, social, and multicultural—concerns and issues related to student development. Contemporary trends have shown qualitative research techniques to be more descriptive and feeling-oriented than quantitative methods. College and university programs and services can benefit from the use of qualitative evaluations because the findings and results can guide the development and planning of workshops, programs, and activities which enhance the process of student development.

Groups

Danchise (1985) reported that the staff at the university counseling center engaged small groups of students in study skills seminars. Verbal feedback from the participants suggested the small group experiences were being well-received and having a positive impact on students' academic performances, including grade point average (GPA). No single indicator reflects academic progress better than GPA. Because GPA is not immutable, and can be improved through education and study skills programs, counseling center staff members extended the basic small group format to a specific university population as a pilot program.

The principles of TQM guided the pilot program's format which used qualitative research methods to evaluate the program and the students' progress. Throughout the first year of operation, verbal feedback from participants and the group leaders' observations and suggestions were recorded. The compiled data and information provided the basis for program change and innovation. During the next two years, qualitative methods were used to assess and evaluate the program at two separate points each quarter. The first evaluation occurred at the midpoint of the program during the fall quarter. Participants were asked to provide handwritten feedback regarding the program. The feedback was compiled and categorized. The second evaluation came at the end of the quarter when participants were asked to complete an investigator-constructed questionnaire. A summary of the data and information generated about the program from the quantitative methods was reported by Whitner and Altman (1986). At a later date, Sanz and Whitner (1987) used qualitative strategies to measure the program's impact on the target population's academic performance. The qualitative approach was criticized by a few university professionals as non-scientific, lacking stringent controls, and investigator-biased. Nevertheless, the variables and criteria that need to be considered and used when developing an academic support program were identified and reported by counseling center professionals (Whitner & Sans, 1988). Eventually, a model for measuring academic achievements among and between student populations at different institutions of higher education was reported (Whitner, 1990).

Organizations

A widely recognized phenomenon in public health, public education, and environmental psychology is that seldom is there an immediate active vocal constituency for prevention activities (Glaser, Abelson, & Garrison, 1983; Schulberg & Baker, 1979; Suls & Willis, 1991). Colleges and universities are not immune to this phenomenon. Unfortunately, program "success" or "failure" is typically determined by the size of the audience or the number of participants. Seldom is the program content or the value of its intended impact considered. Therefore, to assure program success or failure, counseling center staff asked the question "What impact would student group or organizational sponsorship have on prevention and co-curricular program attendance?"

To address the question, a pilot research project based on six programs was conducted during the 1990-91 academic year (Whitner, Abrahamowicz, & Giddan, 1993). These six prevention-oriented programs were varied somewhat systematically in terms of topic or theme, locale and setting, and presenter's gender and training. The programs were randomly divided into two sets of three each. One set was designated to have student group or organization involvement; the other set, non-student involvement or sponsorship. Programs with no involvement were publicized the same as past programs that did not have sponsoring agents. The sponsored programs' publicity was the responsibility of the involved student groups or organizations, which were a residence hall group, a sorority, and an academic speaker activity.

The absence or presence of group or organizational involvement and sponsorship was the primary difference between these two sets of programs. Program attendance figures totaled 19, no-involvement; 187, involvement. As indexed by attendance, this pilot project yielded suggestive evidence that student group and organizational involvement was a key variable in measuring the success of prevention or co-curricular educational programs. Student organizations, clubs, and groups are a valuable resource that all university professionals can utilize through involvement. Involving student organizations to sponsor or endorse prevention or co-curricular programs and activities guarantees a sizeable program audience. Attracting sizeable program audiences guarantees that institutional resources and expertise are maximized and that needed information is disseminated more rapidly.

Institutional

The concepts of the scanning strategy described by Morrison, Renfro, and Boucher (1984) were reviewed, evaluated, and critiqued in 1991 by a small group of counseling center and student development professionals. The concepts were modified for viewing relevant information and data for the local institution (Giddan, Whitner, & Abrahamowicz, 1994). The modified approach for viewing data was then applied to existing large amounts of institutional empirical data. The application of the modified approach was qualitative because it required a logical and analytic process to be imposed on existing sets of tallies, percentages, and other types of information. Also, the viewers of the data had no control over the gathering of the information or data, the statistic with which it was described, the sampling, or the research designs. In addition, the qualitative method was used to compartmentalize the information and data into similar groups or categories which made the data more manageable, useful, relevant, and easier to interpret. The University of California at Los Angeles Cooperative Institutional Research Program (Astin, Green, & Korn, 1987) study is an example of large amounts of institutional information provided to a college or university about its own student population. Institutional characteristics, tendencies, and trends that may be determined from such data through qualitative methods can be beneficial to students, service providers, middle management staff, executive staff, and university planners and goal setters.

For example, when data from an investigator-constructed survey suggest that students feel alone, alienated, and separated from each other, counseling center or student development practitioners can take appropriate institutional measures to address the problem, or refer students to an appropriate university service or office. Abrahamowicz (1988) found that students who were involved in student organizations had a more positive outlook and reported a greater degree of satisfaction with their college experience than students who were not involved. Abrahamowicz also found that the student organizations that were more visible and involved with the campus ecology were perceived by the general student population as distinctively superior and the most preferred.

Conclusion

The compatibility of qualitative research methods and TQM is evident when integrated in an approach which has its focus on the individual or specific and not the whole or global. The TQM philosophy can guide counseling center and student development professionals as they establish accountability through the use of qualitative research methodologies. Accountability can be demonstrated because the impact of the intervention can be documented. In addition, the results or findings may be suggestive or yield meaningful hypotheses regarding developmental change.

The different levels at which the suggested integrated approach has been implemented illustrate varying viewpoints and various methods for gathering information, while the emphasis on empowering workers to focus on customers, quality, and excellence is never lost. In addition, the approach provides counseling centers with its immediacy of studying unfolding phenomena and the freedom from the constraints of performing research that features single variables, manipulation, pre-and-post measures, randomization, and controls. Qualitative methods such as single group studies, case studies, and surveys are more useful because the methods focus on a specific, and are simple, easy to teach, and administer; the information and data are relevant, suggestive, and useful.

Student needs, satisfaction, and outcomes are all measurable. The information and data produced from qualitative research can provide valuable documentation and tangible evidence regarding student life. The integration of qualitative research and TQM philosophy and concepts can allow counseling center and other student development professionals to experience accountability through the documentation of the quality and the excellence of their services.

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Feature . . .

Professional Practices in Counseling . . .

"Professional Practices in Counseling" highlights functional techniques, procedures, points of view, and pointers for applications in various settings within the counseling profession.

The High School Counselor: Restructuring for Survival

Joe V. Diaz

Educational restructuring is being discussed in national conferences and in school districts throughout the country. If counselors are to survive they need to examine their roles thoroughly. Counselors who function effectively as consultants will play a critical role in the appropriate restructuring of educational programs.

The theme in today's educational community seems to be to change and to change fast (Gibson, 1992). The purpose of this article is to encourage public school counselors to reexamine their roles in light of current discussions related to restructuring, voucher initiatives, and budgetary constraints. Counselors need to concern themselves with organizational developmental issues that may bring about change in educational programs. They should be active in redefining the school curriculum to meet the needs of students, parents, teachers, and the community more effectively. Moving this direction will require them to serve as consultants.

The Counselor As Consultant

The idea of counselor as consultant has been around for some time but has, in the author's opinion, not been taken too seriously. Recently some universities have eliminated their counselor training programs (Pupil Personnel Credentials), perhaps suggesting that school counseling programs are no longer viable. Accrediting agencies seem to be ignoring the public school counselor and moving toward private practitioner licensure. The time is now for public school counselors to examine their roles if they want to survive into the next decade.

Yesterday in educational circles the buzz word was "reform." Today it is "restructuring." Gibson (1992) stated that restructuring must come from within each school district, with consultation sought from the private and public sectors. He also pointed out that, in restructuring the schools, there must be a way to remove the existing structure so as not to cause chaos, since ownership and history are very strong. Dreikurs, Grunwald, and Pepper (1971) maintained that all reforms reflect an attempt to change concepts and procedures. As long as certain convictions about student behavior remain unchanged, there is little or no chance to restructure established educational programs.

A positive climate must be created to ensure that there will be a commitment to restructuring efforts in school curricula, policies, and programs. School personnel must take ownership, and management must provide the means and freedom for restructuring to occur.

Joe V. Diaz is Counselor, Psychological Services, California Polytechnic State University, San Luis Obispo.

To implement restructuring, the relationship between students, parents, community, and school personnel needs to be examined. According to Ginott (1972), most of the problems in education are related to teacher-student relationships. For any reforms to be effective, this has to change. Educators need to see the school system from the student's perspective. Teachers need skills in dealing effectively with minute-to-minute happenings, irritations, daily conflicts, and sudden crises. A teacher's response has crucial consequences (Ginott, 1972). Restructuring, therefore, creates an opportunity for counselors to evaluate and demonstrate the significance of their roles.

Counselors should take the initiative in utilizing their counseling skills to help make schools more satisfying for both students and teachers (Thomas, 1989). Counselors, more than any other school personnel, should have a broader perspective of the school's curriculum and its effect on students and staff. Their training in test interpretation, learning theory, and human growth and development can be very helpful in a variety of ways (Hartman, 1988). Rosalie Humphrey, former president of the American School Counselor Association, stated, "Counselors have the contacts, training, and public relations knowledge to facilitate leadership development in schools and to assist in team-building among teachers, parents, and administrators . . . Counselors can serve as consultants and help design strategies to make changes occur" (cited in Backover, 1988, p. 16).

The role statement of the American School Counselor Association (1981) includes the concept that counseling is maximized when counselors provide consultation and in-service training to staff and incorporate developmental psychology in the school's curriculum. Counselors have listening and interactive skills, and understanding of group process; thus, they have the ability to help individuals successfully communicate with others and to assist with classroom dynamics and interaction (Lindberg, 1977).

In these times of shrinking budgets, counselors need to change their role from quasi-administration to more direct involvement with students, parents, and classroom teachers. Counselors should get actively involved in curriculum and program planning; they can no longer depend on traditional approaches in preparing students to survive the real world. Counselors should be the catalysts in bringing about change in the school environment by becoming in-house consultants. As consultants, they can better serve students, parents, teachers, and administrators. The counselor as consultant, according to Blocher (1977), builds on the natural partnership between the teacher and the counselor in terms of commonality of goals. Blocher further stated that consultation draws upon the existing expertise the counselor has in dealing with student motivation and self-esteem. The counselor as consultant aims to help teachers to be more aware of events or processes in the school environment and of the ways these events affect their work (Schein, 1969).

The impact of the counselor's role as consultant to the classroom teacher was reported by Lawson and Parker (1978). Lawson and Parker consulted with teachers to help them adapt their methods of instruction to the developmental learning characteristics of their students. They implied that reaching the largest number of students for developmental purposes is best achieved by working with teachers who have the most contact with students. Throughout the consultative process they were able to change teachers' behavior by demonstrating how students can learn to analyze and synthesize. They also were able to alter teachers' perceptions of student behavior by identifying teaching styles in the classroom. The practice of consultation does appear to be effective (Medway, 1979), although, according to Biggers (1977), counselors have not generally exercised a consultative role.

The key factor for counselor survival in the educational system will be their consultation with the classroom teacher. Together counselors and teachers will be able to create programs that will help students develop and accept an integrated and adequate picture of themselves. The California Task Force to Promote Self-Esteem and Personal and Social Responsibility (1990) recommended that every school district make a conscious effort to promote self-esteem and personal and social responsibility. Counselors, by nature of their positions, typically have a global perspective of how the curriculum and school environment impact students and school personnel. Ivey (1977) stated that counselors should consider counseling as only one of their skills, and suggested that they become teachers, curriculum developers, and consultants. He pointed out that counselors can teach human relations skills, develop systematic curriculum for students, and serve as consultants-facilitators for teachers, parents, and administrators. Menacker and Linton (1974) saw the counselor as having a direct involvement with students and environmental interventions.

Impediments to Counselor Role Change

Traditionally, counselors are seen by many students as unavailable or ineffective, if they are even aware of a counselor's existence (California Task Force on Self-Esteem, 1990). A study by Leviton (1977) revealed that counselor effectiveness was seen as strongest in areas directly related to registration, scheduling, and dispensing college information and grades. His study pointed out that counselors were viewed as less helpful in providing personal counseling, such as counseling for families, discipline, and psychological problems. Wiggins and Moody (1987) found that counselors who spend their time disproportionately in clerical responsibilities were rated low in being available. They concluded that these counselors lacked effective counseling skills. Counselors who were more available were rated high and therefore thought to have a better level of counseling skills when working with students with personal and career concerns.

Podemski and Childers (1982) suggested educational updating of school administrators, many of whom view the counselor as entrenched in scheduling, counting grade credits, and other administrative functions. Aubrey (1982) maintained that counselors have been placed in a triple-bind situation and that school administrators tend to use them to achieve administration goals. Aubrey (1985) also stated that counselors are perceived as being on the periphery, and that they have allowed themselves to become isolated from what is going on in the school, and from the central issues of school development.

The alignment of counselors with administrators has taken counseling out of the mainstream. Instead of affecting and influencing the administration they have been influenced and affected by it. For counselors to have a significant impact on teachers, students, parents, and administrators, they will have to be actively involved in helping to identify the factors that affect perceptions of the school environment. Counselors should work with teachers, parents, administrators, and the community but also should remain steadfast in their commitment to ensure students' developmental growth and self-esteem. The teacher is the prime agent within the learning process; the counselor is the vital strategist, consultant, and trainer (Carroll, 1973). "The function of therapeutic and developmental counseling is being taken by the classroom teacher . . . Counselors will shift their priorities to teaching and training parents, students, school staff, and lay people to use counseling skills" (Pine, 1974, p. 94). Unfortunately, however, administrators still determine school functions and procedures and dictate the counselor's role. Counselors and administrators need to get together and negotiate a contract that clearly spells out the counselor's role (Boy & Pine, 1980).

In the face of current diminishing financial support, school budgets are being drastically cut and counseling services in several schools have been eliminated or severely modified. The state of the current economy may threaten to eliminate the counseling function in schools (Backover, 1992). It is critical for today's counselors to demonstrate their significance and the benefits they provide to the school environment, especially the administration. Past ASCA President Perry (cited in Backover, 1992, p. 16) admonished counselors to advocate for themselves, not just when job security may be in danger, but to demonstrate why counseling is important. Leviton (1977) also maintained that "the rational evaluation of counseling is imperative if it is to survive" (p. 24).

Conclusion

Counselors, then, need to become involved in the total process of educating students, maintaining the quality of education, and becoming agents of change. Most importantly, they need to function as consultants who facilitate better communication among teachers, students, parents, and administrators. By focusing on educational reforms and the present emphasis on restructuring, counselors have an opportunity to redefine their roles. They must act now to ensure their survival in the 1990s and beyond. Von Oech (1990) stated, "This world was built with people who knew how to get into an imaginative frame of mind, listen to their imagination, and build on the idea they found there" (p. 85). Counselors must be creative to survive.

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Using Information in Counseling Children: A Child-Centered Perspective

Angelo V. Boy

The child-centered tradition deemphasizes the use of information in counseling and instead focuses on a relationship in which the child becomes increasingly able to express repressed feelings which influence behavior. The reality of counseling children, however, necessitates a middle ground regarding the use of information.

The child-centered viewpoint contained in this article is derived from the basic contributions of Rogers (1942, 1951) and Boy and Pine (1963, 1995). The child-centered viewpoint has remained unique through the decades because of its attention to the therapeutic quality of the counseling relationship. Client-centeredness focuses on the development of this quality as the core process for helping clients.

Child-centered counseling has had a long-standing aversion to using information as a focal point of counseling, postulating that the therapeutic quality of the counseling relationship has far greater potential for influencing behavioral change. In an information-centered society, however, it is very difficult for child-centered counseling to maintain its aversion to information. This article is not intended to contribute to that aversion. While offering a critique regarding the use of information in counseling, this article provides guidelines for using information that are in harmony with the philosophy of child-centered counseling.

Information: Help or Hindrance?

Collecting information so the counselor can make a valid and accurate interpretation or diagnosis of the child's problem has often been considered an essential step in the counseling process. Many counselors believe that by collecting information they may understand better, and that by giving information they may be more effective in helping the child to resolve a problem. As a preliminary step to, or as an integral part of, counseling, the "information-getting-dispensing" procedure sometimes receives a major portion of the counselor's time and attention. Is the same amount of time and focus given to collection, analysis, and dissemination of information justified in terms of effective results? Is information a help to the counselor and the child, or can it be a hindrance?

The Limitations of Using Information in Counseling

1. Information is often subjective and inaccurate. One major source of information is observation of the child's behavior. Unfortunately, this source may be characterized by subjectivity and personal bias. Observations may tend to be more interpretive than objective and do not include the child's perceptions and observations.

The "factual" information the counselor ordinarily uses is not always derived from a collection of facts. Evaluations and comments about the child are often opinions based on value judgments and cannot be considered facts. Test scores reflect samples of behavior at points in time and are, at best, estimates of performance and not facts. The counselor usually possesses information which may represent someone else's reality and not the child's.

Angelo V. Boy is Professor of Education, University of New Hampshire, Durham.

2. In the analysis of data the counselor is a subjective element. Given the same information, several counselors can arrive at several different interpretations and diagnoses. The personality and values of a counselor may influence how information is interpreted.

Interpretation of information may be more reflective of the counselor than the child. In handling and processing information, frequently the counselor acts on the basis of subjectivity contained in individual perceptions.

3. Irrelevant information may be used by a counselor because it is the only information available. Significant information regarding the child may not be included in records or data. In the absence of such information, the counselor may act on what is available to explain the child's past behavior and to modify the child's present behavior—simply because it is available and for no other reason. For example, if a child is failing school and the child's mother is an alcoholic, the failure is related to that; if the child is the youngest in a family, the failure is related to that; if the child is an only child, the failure is related to that; if the child is an older child, the parents are expecting too much and the failure is related to that; if the child comes from a single parent home, the failure is related to that; if the child comes from a working-class home, the failure is due to cultural deprivation; if the child comes from a culturally enriched home, the child is failing because of rebelliousness. And so it goes.

The use of psychological profiles derived from tests may move the counselor to become interested in children as a function of their psychological profiles, rather than as fully dimensioned human beings. The counselor may develop a myopic view of the counseled—perceived not as a person, but as a representation of the record—as an object.

4. Information gives the counselor a preconception of what the child is. In using information gathered from other sources, the counselor works with perceptions external to the child's frame of reference. The image of the child which the counselor develops from other sources may not be congruent with the child's self-concept and may present a barrier which will prevent the counselor from entering the child's inner world of feelings and experiences.

5. The use of information may distort the effective qualities of the counseling relationship. The information-using counselor is often perceived by the child as an information-gatherer and information-evaluator. The counselor's common practice of analyzing a child's personality and behavior places the counselor in the role of an evaluator or judge. Children are aware of and are sensitive to such procedures and cannot help but perceive the counselor as an evaluator or judge regardless of the counselor's efforts to dispel such notions.

6. The practice of gathering and using information may constitute a threat to the child and prevent the child from revealing feelings and deeper experiences which contribute to behavior. The acceptance of an evaluative function by the counselor presents a conflict in roles. A counselor who focuses on information and evaluation does not often provide the child with the ingredients necessary for a therapeutic relationship. A child will often have difficulty expressing feelings, thoughts, or intimate perceptions with another person who is perceived as one who may use such intimate knowledge in a written evaluation.

Children who are anxious about what will go on their records will naturally be hesitant about revealing sensitive material to counselors. The dossier-building child counselor who becomes overly involved in using records represents the child's ability to be honest and will block the child's expression of feelings which can help solve the problem.

7. Questioning is used by many counselors as a standard procedure for eliciting information. Because the counselor determines which questions to ask and when to ask them, question-and-answer relationships are markedly counselor-centered. In such a relationship the child can only await the counselor's next question. The child has little or no opportunity to examine repressed feelings, thoughts, and experiences because the relationship conditions the child to be more sensitive to answering the counselor's questions. The child responds, not as the child feels, but according to the area identified by the counselor's question. Whenever the counselor structures the relationship by using questions, the counselor does not get to know the child but gets to know about the child. Knowing the child is vastly different from knowing facts about the child.

Using Information in Counseling

Recognizing the fallibility and limitations of information external to the child, one may ask: Is such information any less accurate than the information the child derives from personal perceptions, the child's own internal view? Isn't it possible that the child will be an inaccurate source of information? Can't the child be involved in self-deception? Isn't it prudent to provide an external referent against which to check the child's personal perceptions?

To the child-centered counselor, the issue is not which source provides the most accurate information about the child. The child-centered counselor is more interested in the perceptions of the child even though these perceptions may be considered inaccurate by others. For the child, the child's perceptions are truth and reality; they are "facts." The child's behavior is a result of these perceptions. The child's behavior will change when the child's perceptions change. When a child-centered counselor develops a therapeutic relationship with a child, the counselor is able to enter the child's world of perceptions and understand how these perceptions influence the child's behavior.

Even the most child-centered of counselors, however, cannot avoid the intrusion of some information into the counseling process. The child-centered counselor, however, is sensitive to how the use of some information can eventually lead to the use of more information. Therefore, from a child-centered viewpoint, information is always used minimally and cautiously.

The following guidelines, when used judiciously, will not intrude on or diminish the therapeutic quality of the counseling relationship. The protection of this quality is a clear indicator of the child-centered viewpoint.

Child-Centered Guidelines for Using Information with Children

1. The child decides when information is needed, what information is needed, and how the child wishes to obtain it; the child is provided opportunities for locating information and discussing it with the counselor. There is not much point in the child using information unless the child wants it. If a child needs and desires information in order to make a decision, the child should have it.

2. Information is used by the counselor in such a way as not to compromise the therapeutic quality of the counseling relationship. One way to preserve the therapeutic quality of the relationship is to enable the child to get information from other sources. This includes making the child's file available to the child if the child chooses to see it.

3. Information is presented in a neutral way without the counselor giving the information more authority than it deserves. In giving the child information, the counselor's attitude is important. As the counselor communicates information, the counselor com-

municates respect for the child's capacity to evaluate the information.

4. With the presentation of information, the counselor waits for the child to react with feelings. The counselor accepts the child's feelings and provides an atmosphere in which the child can freely search the relationship between the child's self-concept and that information. The counselor provides ample opportunity for the child to respond to information through the expression of feelings about the information.

5. Information is presented in terms that are understandable to the child, with due recognition on the part of the counselor that only information congruent with the child's self-concept and perceptions will be accepted by the child.

Conclusion

In conclusion, the child-centered counselor is diligent about maintaining sensitivity to the child's affective needs in the counseling process. These affective needs form the motivational influence for the child's behavior. If the counselor expects to help the child to change behavior, the counselor must be sensitive to these affective influences. The child-centered counselor is far more interested in how the child's feelings influence behavior than in information about the child. Helping these feelings to become expressed and helping the child to recognize the influence of these feelings upon behavior is at the heart of child-centered counseling. When information is used it is used minimally, cautiously, and according to the guidelines outlined in this article. When these guidelines are followed, the therapeutic integrity of the counseling process has a greater opportunity to be maintained.

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Feature . . .

The Personal Side of Counseling . . .

"The Personal Side of Counseling" highlights feelings, opinions, and attitudes within and about the counseling profession.

As Long as There Are Katrinas, It's Still Not Enough

Trish Hatch

This touching story describes the unique and vital role of an elementary school counselor as she struggles to obtain necessary services for a chronically ill student. Through determination the counselor was able to assist. The author reminds us all of the incredible opportunity the counselor has to impact a child's life in a positive and lasting way.

Last year I realized my dream of 7 years as a counselor. I was finally a full-time elementary counselor at a school with a manageable caseload of 580 students. After years of splitting my time between two schools with caseloads of 1,500-1,900, I had one school site that was dedicated to supporting, through Title I funding, a full-time elementary school counseling program. I had visions of counseling every student scheduled and of ending each day with an uncluttered desk.

I have a model elementary counseling program. I teach classroom guidance lessons weekly to over 200 fourth and fifth grade students. I lead counseling groups for children with behavioral problems, with Attention Deficit Disorder, whose parents are drug addicts, whose parents are separating or divorcing, and whose relatives are dying or deceased. I train and implement fourth and fifth grade conflict managers to assist younger students on the playground during recess. I counsel pupils individually, present in-service education for staff, meet with parents, attend School Attendance Review Board hearings and Student Study Team meetings, and teach Active Teaching programs and parenting classes. I have designed a classroom-sized multi-use Guidance Center with 50 children's guidance books and 25 videos available for teachers to check out and use. I work with a tremendous staff and principal that are supportive and believe in counseling, and you know what? It's not enough; *it's still not enough.*

Each day brings an unexpected crisis that needs immediate intervention—immediate total committed "stop-everything-and-help" crisis intervention. It seems that elementary campuses are becoming places where learning is secondary to survival – physical, emotional, and academic. Last week is a good example. I had planned for weeks to set aside 2 days to go through the mountain of paper work on my desk. "They're doing yearly testing," I thought. "I'll get something done." While welcoming students to school on that chilly and damp morning, I saw what I still believe was one of the saddest sights of my career. About 200 yards from me shuffled a tiny waif. Her hair hung in front of her face so that her eyes were not visible. She moved very slowly, about 2 inches at a time as she struggled to make her way toward school. I watched in disbelief. "What was wrong with

Trish Hatch is 1996-97 President of the California School Counselor Association, and Elementary School Counselor, Moreno Valley Unified School District, Moreno Valley, California.

her? Was she hurt?" As a counselor I wondered, "Has she been beaten? Molested? Raped? Why is she walking so slowly and in what seems to be such pain?" I approached and asked her what was wrong. "My legs hurt," she responded in a low shallow voice. What's wrong with your legs?" I inquired. "I have arthritis," she told me. "Does it hurt a lot today?" I asked, trying to remember that I was a professional and trying not to overreact. What I really wanted to say was, "How could your mother let you walk to school in this condition?" "Yes," she said.

I picked her up as gently as I could and carried her to my office as she grimaced. I placed her on my table and lifted her pant leg to see her knee. It was all I could do to keep from gasping. Her tiny toothpick legs had knees swollen to the size of grapefruits. As I looked in horror, I questioned her about her condition. She told me that she hurt all the time and that she had no medication for the problem. I asked when she had last seen a doctor. It had been long enough for her not to remember. I questioned the teacher as to her condition. The teacher told me she knew Katrina¹ had arthritis, that the mother had told her she was getting medical help, and that nothing else could be done. The teacher seemed to feel that walking to school was good for Katrina. Later we were to learn that this is true under normal circumstances. The teacher was unaware, however, that Katrina had walked all the way to and from school, which was about a mile, and that she had been doing this for several days. As a school counselor, a mother of three, and a human being, I was wrenched emotionally. Something had to be done immediately. This child could not walk to school again in this condition. I took the wheelchair from the nurse's office and rolled her to class. I then called the mother, who cried as she told me her story. She explained to me that she had taken Katrina to the doctor twice in the last 3 months and that Katrina could not tolerate the medication that had been prescribed. In addition, mom felt the doctors "wouldn't listen to her" and that she was "treated badly because she is on Medi-Cal." Although referred to University Hospital, Katrina had not been accepted because she was a Medi-Cal patient signed with a Primary Care Case Management Program (PCCMP).²

I questioned the mother about having her daughter walk to school. She said that the family car had broken down, that there was no other way for her to get there, that Katrina wanted to go to school, and that she (80 lbs. herself) could not carry her. I explained to mom that this child needed a doctor—now. I began to wonder whether there were other issues surrounding the lack of treatment. I obtained the phone number of the PCCMP doctor and called him. He was impatient with me, but I persisted to persist and scheduled an appointment for the next day. Next came transportation. I arranged to borrow a school district vehicle for the following morning and told the mom that I'd pick them up for the doctor's appointment in the morning. In the meantime I loaned the school's extra wheelchair to Katrina and her mom so Katrina could be wheeled home from school. I also obtained paper work to be filled out by the doctor so that the school district could have a bus pick her up at the door and return her home each day, a service that the parent did not know was available.

1. Katrina is a fictitious name. Names of people and places were changed in this article to preserve anonymity and confidentiality.

2. Eligible patients have the choice of registering with straight Medi-Cal or with a state-contracted Primary Care Case Management Program. According to the private company I contacted, managed care providers go door-to-door soliciting clients for private coverage which is state paid. The advantage, they say, is that patients have local primary care physicians who know them. The drawback, according to the general hospital eligibility worker, is that services can be limited and controlled by the primary physician or the care provider. The patient has to get approval for medications and special services, which can be, and in this case was, impossible for this patient.

Later that same morning three girls from the school came to see me to explain that a man on their street had been molesting several girls at the school for months. There went the rest of the day. After 4 hours with forms, Child Protective Services workers, and parents, I had added to the pile on my desk. "Friday," I sighed, "after Katrina's appointment, I'll finally get something done." And I did—perhaps the most important thing I've done in 8 years as a counselor.

I picked Katrina and her mom up at 8:30 a.m. for her appointment with the doctor. After our hour-long wait, the physician asked why we were there. Mom and I explained. The entire examination consisted of lifting one pant leg and looking at her knee. He then signed the form for transportation and was about to leave. "What about her condition?" I asked. He suggested mom take her to a specialist at University Hospital." I can't," explained mom. "The last time you referred me there I waited 8 hours only to be told that they don't take my coverage and that I had to come back here to see you again." The doctor explained, "She needs to be in physical therapy. She needs more specialized treatment than I can give her. I'll give you a referral to University Hospital." He said there was nothing else he could do. I intervened. "You don't understand," I said. "This child can't go on like this. She can hardly walk. It could be days or weeks before she can see the specialist."

He had seen us carry Katrina into the room, as she was barely ambulatory and in tremendous pain. "She needs therapeutic intervention for her symptoms of depression, a wheelchair, and a complete physical evaluation by someone who understands this condition," I pleaded. He prescribed Motrin (large pills) and left the room. I said to the nurses, "Isn't there something you can do?" Here was a child who couldn't walk, who appeared depressed, whose face was ashen with pain, and who weighed 40 lbs. as an 8-year old. All the physician could do was give her pills, a referral to a hospital that already refused to see her and sign a transportation sheet! I was getting angry—polite, assertive, but furious inside. It seemed as though no one cared, that our appointment was over, and that we were supposed to leave. But I didn't. "This is the way they always treat you," said mom. "Well not today," I told her.

I went back to the nurses and inquired, "Can't something be done? The mother has no idea how to get her child into University Hospital to see a specialist since she was turned down before. She has no transportation, does not know how to get her daughter through the system, and may not have the strength right now to fight the fight necessary to get her child in the door. You know people. Can't you call someone? Anyone? Won't someone see this child?" I walked out and got Katrina. I carried her back into the nurses' station, placed her on the counter in front of them, and lifted her pant legs—to the gasps of the three nurses. One of them picked up the phone. She was an obstetrics nurse who visited the location once a month to do patient checks, and she saw Katrina's legs and she understood my concern. "I have the district car only today," I told her. "I'll take all day if I need to, but I don't know when I'll be able to get the time or the car again. Mom has no transportation, and I'm afraid she won't follow through; she can't even take a bus unless she carries the child." The nurse made several phone calls and managed to reach a pediatric rheumatologist, Dr. T. from University Hospital, who also sees patients at General Hospital. He remembered Katrina from several years back when he had seen her, and said that he would make room for her that day. "What a relief!! She was going to see a specialist who could really help her," I thought. I was, and am, so grateful to that nurse.

I took Katrina to eat a hamburger while mom dropped off the prescription. We then drove to the General Hospital and went to the registration room. There we were told that since Katrina was signed up with PCCMP that they could not allow Katrina to be seen

by the doctor. I began to explain the whole story. I told them that Dr. T. had said that he wanted to see her, and that he remembered Katrina and would set up a special time to see her because he was concerned. I was told that none of that would matter (including what the doctor said) unless they got PCCMP approval. Katrina's mom said, "See, I told you. This is what happens. No one really cares." I was beginning to believe her. I stood my ground, and explained that I had taken a day from work to do this, and that I was not leaving until Katrina was seen by Dr. T. I must have made an impression because the receptionist checked with her supervisor, and we were told it was approved.

We then started the long wait for her to be seen. It was worth it. Dr. T. and his resident spent 2 hours with us. They both examined her thoroughly and found that her chronic condition, Juvenile Rheumatoid Arthritis (JRA), had seriously flared up in her knees, elbows, wrist, and even her back. He almost hospitalized her right then but decided not to because Katrina was able to stand and walk although still with great struggle. Hospitalization would have removed her from her emotional support system and from school, which she really enjoyed. Instead, he gave her a prescription for liquid Motrin (a better choice for the child than the large pills), took blood and urine specimens, scheduled physical therapy, instructed mom and Katrina on exercises she should do every morning, and scheduled an appointment with an ophthalmologist because Katrina was also having trouble with vision. He also consulted with the social worker regarding Katrina's need for counseling and mom's need to get her medical coverage changed back to straight Medi-Cal so that Katrina could be seen again without all the red tape. By the time I carried Katrina the half-mile trip to the lab and back to the car, drove everyone home, and returned the district car, it was 5:30 p.m. Friday's day for organizing paper work became Katrina's day, one of the most productive days I've had in my career.

The hours of wait had been productive as well. The time gave me a chance to get to know Katrina's mom better. Seems I had been right. She had some other unresolved issues. Katrina had been diagnosed as a baby with JRA, and Dr. T. had been her primary physician. Two years ago, however, mom was divorced, and her life fell apart. That's when Dr. T. last saw Katrina. He told me that he had tried to keep in contact, but that mom's address kept changing. Mom related to me details of her misfortune which she referred to as "tough times." She struggled through the ramifications of her admittedly poor choices and the toll it had taken on their life style. Mom's continued problems resulted in a strained relationship with her extended family, transiency, and homelessness. Mom insisted, however, that hard times were over and that her choices now were positive. As I listened, I wondered if her lack of assertiveness in gaining assistance for her child's medical condition was an indicator of continued personal problems, ignorance of the system, a nonassertive temperament, or a lack of concern for her child's well-being. I wanted to know about mom because I couldn't understand how any human being could allow a child to walk to school a mile each way in Katrina's condition. Yet I knew that mom had tried to get Katrina help but had hit the bureaucratic brick wall and *stopped trying*. I thought, "Here is a woman with little education and less self-confidence who is attempting a life-style change, but with symptoms of continuing concern. She feels rejected by her family, has no job, and little money. She lives in a small rented house with her sister who is also struggling with a 2-year-old child of her own." Meanwhile, I'm questioning her actions toward her chronically ill child as I sit in my large home with our joint professional incomes, my three healthy children, an intact nuclear and extended family, and full health benefits, and I ask: "Who am I to judge?"

I watched Katrina and her mom interact with genuine love. Mom would caress her, kiss her, talk softly to her, and cry. She apologized to Katrina for not getting help sooner, and thanked me more times than I can count for what I did because "No one ever helped me like this before."

On Monday Katrina returned to school in her wheelchair with a smile. She was glad to be back but I could still see that she was still in pain. "Did you do your exercises today?" "No." "Did mom give you medication?" "No." "Ugh!" I told myself. "What happened?" At the end of the school day the bus arrived to take her home. Tuesday Katrina was not at home when the bus came to pick her up. Where was she?? I paid a home visit to the sister who informed me that they went to the boyfriend's home, and that the car "blew a rod." I became impatient and questioned my investment in this case. I told her that I had spent too much time on this to let it drop, that Katrina was to be in school every day with her medication, that Katrina must do her exercises, that we weren't going to go away, and that I would be at their house every day if I had to. Wednesday, Katrina came to school. The school nurse called mom to inquire about medication. The pharmacist was unable to fill the prescription because the PCCMP only covered Naprosyn, which Katrina couldn't tolerate because it upset her stomach. It took some doing, but a pharmacy in another city finally gave her the prescribed medication. The pharmacy would give her only a week's dosage at a time, and, of course, then mom had to get there—and she did.

Once on the medication Katrina seemed fine for a week. The following week, however, things changed. The medication ran out, mom hadn't refilled the prescription yet, and Katrina was in such pain that she had to be carried on and off the bus. She couldn't stand for the flag salute at all. The teacher was helping Katrina daily with exercises because they weren't being done consistently at home. I was becoming more and more concerned about mom's ability to care for her.

I called a colleague at social services and discussed placement outside the home. "This is a tough one. Yes, it's neglect to me, but does it meet state criteria? Was she in danger? She isn't going to die. JRA is a painful disease and it's more comfortable with medication and physical therapy, but it doesn't kill you to go without those things. Katrina had food in the home, and a loving though struggling mom, but her condition appeared to be worsening." I decided that I would check back in with Dr. T. I explained the situation, and he confirmed that indeed originally mom had tried to get the medication but had had difficulty and that they were trying to register the family with straight Medi-Cal, and that the social worker was looking into Crippled Children's Services (CCS). I told him that I thought Katrina needed to be hospitalized so that treatment could take place, and mom could get the paper work arranged. He agreed that, if she was indeed nonambulatory, that it was time to admit her to residential care. He called Katrina's mom to schedule a time to bring in Katrina the next day.

As I walked from the staff room to the front office that Friday, I saw mom. She was returning the wheelchair. "She's in the hospital," she said through her tears. "I know, it's the best place for her now, until she's stabilized. Are you going to see her?" I asked. "I'm staying with her. They'll let me be in her room and spend the night," said mom. I was so relieved. It wasn't just that she was staying with Katrina but that she wanted to. Katrina wouldn't be alone, and mom didn't abandon her.

Today I called the hospital to talk to Katrina, and mom was there. She told me that Katrina's paper work was done, that her CCS plan was being developed, and that she had an appointment to gain disability certification for Katrina so she could afford transportation to physical therapy and pay for her other needs. Katrina, I could tell, was smiling as I spoke to her on the phone. Her delicate voice was the most cheerful I had heard. She told me of the playroom and her new friends, and that she would be there one more week. Mom said she was grateful. At the end of the conversation she asked, "Will you be at work tomorrow?" "I'm in training," I said, "but I'll be there Tuesday. Why?" She replied, "Well, our family talked about it, and me and my dad want to send you flowers for all you've

done to help me and Katrina." I thought "And dad? Her dad? Grandpa? This is great! Maybe they'll re-enter the family and help. For Katrina's sake, I hope so."³

I hung up the phone and looked at my desk—what a mess. I came to the office on a Sunday to clean up my desk and felt compelled to start writing this story about Katrina—her bravery, her pain, her needs, and her suffering. As a school counselor, I see so many Katrinas out there in this world who walk to school every day carrying physical and emotional burdens. There are so many moms and dads who don't have the confidence or tenacity to get what they need from the system to help their kids. These parents may risk their child's health or even removal by social services because of their apathy, ignorance, or lifestyle choices. I could be angry at mom, but mom is not my client—Katrina is. Whatever it takes to help that little sweetheart is what I need to do.

Seven years ago I wouldn't have believed that a full-time counselor at an elementary school with 580 students would not have enough time to serve all the children with needs. It seems the lower my caseload the greater the individual need, and I realize how superficial and limited my services were before. The proactive approach to counseling has created a realization by staff, students, and parents that *professional school counselors are a necessary and integral part of advocating for children's needs*. Now, when the time comes to decide how to spend Title I monies at my school, counseling is assumed, not debated. Two more counselors could be employed at our school and still not fulfill all of the counseling and guidance needs.

I'll keep dreaming that some day my caseload will be low enough to leave on a Friday with a clean desk. Until then the paper work can sit there—because another Katrina is shuffling through the door.

3. Katrina still struggles with the disease, sees the doctor regularly, and receives physical therapy. When asked for permission to print this article, mom was tearful as she reminisced, but steadfast in her decision to have this article printed so that other children, parents, and counselors could profit.

Mi Sueño

By Teresa Mercado-Cota

¡Que, Qué! Ahí mijita... Education for what, you will marry and see it was not meant to be, not for you, not for me....

¡Que, Qué! Ahí amijita... Education for what, your "fine" José will not like it and you will become like Laurita, she no longer wants to be parte....

What! Oh no, my little counselee... College education for what, your R.O.P. course will suffice, you will work in an office with my other little mice....

What! Oh no, my little student... There must be some mistake, you received the highest score, let me review those papers once more....

¡Que, Qué! my little empleadita... A graduate education you say, can't you settle for the money and benefits we pay....

¡Que, Qué! my little esposita... A graduate education like me, can't you wait until I get my doctorate degree....

¡Que, Qué! our little mamacita... A graduate education, but we need you with us, we're so little and helpless....

Our community suffers, in need of me, yet it cannot help, it cannot see....

I will grow in a vine that will twist and bend but never give up my sueño, I will fight to the end....

Que - what

Mi sueño - my dream

Ahi mijita - there little daughter

Ahi amiguita - there little female friend

Parte - part

R.O.P. - regional occupational center

Empleadita - little employee

Esposita - little wife

Mamacita - mommy

Teresa Mercado-Cota is Graduate Student, California State University at Long Beach.

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California Association for Counseling and Development
2555 East Chapman Avenue, Suite 201
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(714) 871-6460
FAX: (714) 871-5132

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